



THE HUNDRED AND TENTH
ANNUAL REPORT UPON

THE HEALTH OF LEICESTER DURING 1958

E. K. MACDONALD
O.B.E., M.D., D.P.H.

CITY OF LEICESTER

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QUALIFICATIONS AND DUTIES OF SENIOR PUBLIC HEALTH OFFICERS

As specifically requested in Ministry of Health Circular 1/54, the following details are given :

Medical Officer of Health

E. K. MACDONALD, O.B.E., M.D., D.P.H.

Exercises oversight and control over all the City's Health Service, advises all Committees of the Corporation on medical matters, and acts as Principal School Medical Officer.

Deputy Medical Officer of Health

A. I. ROSS, M.D., D.P.H.

Acts as Deputy to the Medical Officer of Health, including the School Health Service, and particularly supervises the work of the City Ambulance Service, the City Mental Health Service, the Home Nursing Service, and the control of infectious disease.

Senior Medical Officer for Maternity and Child Welfare

(Miss) **E. B. B. HUMPHREYS, M.B., ch.B., (retired 21st January, 1958)**

T. A. I. REES, B.Sc., M.B., B.Ch., D.P.H., D.I.H., D.C.H., D.Obst.R.C.O.G.
(commenced 21st January, 1958)

Responsible for the control of the Maternity and Child Welfare Service, including the Health Visitor, Midwifery, and Day Nursery and Clinic Services.

Tuberculosis Officer

C. M. CONNOLLY, B.Sc., M.D., M.R.C.P., D.P.H.

Though primarily appointed by and responsible to the Sheffield Regional Hospital Board as Consultant Chest Physician, and in this capacity, in charge of the Leicester Chest Clinic and of beds at the Leicester Isolation Hospital and Chest Unit, is also responsible, in co-operation with the Medical Officer of Health, for the preventive side of the campaign against tuberculosis.

Public Analyst

F. C. BULLOCK, B.Sc., P.A.Inst.W.E., F.R.I.C.

Responsible for the work of the Public Analyst's Laboratory and for the analysis of and reporting on samples of Foods and Drugs and other matters.

Chief Public Health Inspector

G. A. HILLER, F.R.S.H., A.M.I.S.E., F.S.I.A.

Responsible for the work of the Public Health Inspection Department.

Chief Administrative Assistant

F. KELLETT, F.C.C.S.

Responsible to the Medical Officer of Health for all the lay administration of the Department, and for the work of all the non-professional staff.

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SUMMARY OF STATISTICS

FOR THE YEAR 1958

Population (estimated), mid-1958	277,700
Population at Census, 8th April, 1951	..	..	..	285,061
Marriages	..	..	..	2,350
Live births (corrected)	..	..	..	4,440
Live birth-rate per 1,000 population (standardised birth-rate=16.15)	..	..	..	16.0
Stillbirths	..	..	..	97
Stillbirth rate per 1,000 live and stillbirths	..	..	..	21.4
Total live and stillbirths	..	..	..	4,537
Infant deaths	..	..	..	113
Infant mortality rate per 1,000 live births—total	..	..	..	25.45
Infant mortality rate per 1,000 live births—legitimate	..	..	..	25.25
Infant mortality rate per 1,000 live births—illegitimate	..	..	..	28.04
Neo-natal mortality rate per 1,000 live births (first four weeks)	..	..	..	18.47
Illegitimate live births per cent of total live births	..	..	..	7.23%
Maternal deaths (including abortion)	..	..	..	1
Maternal mortality rate per 1,000 live and stillbirths	..	..	..	0.22
Deaths (corrected for transferable deaths)	..	..	..	3,333
Death-rate (standardised death-rate=12.36)	..	..	..	12.0
Zymotic death-rate (per 1,000 population)	..	..	..	0.086
Respiratory Disease death-rate (per 1,000 population)	..	..	..	1.18
Cancer death-rate (per 1,000 population)	..	..	..	2.23
Tuberculosis death-rate (per 1,000 population)	..	..	..	0.090
Phthisis death-rate (per 1,000 population)	..	..	..	0.072

Area of City (in acres)	..	..	..	16,990
Number of Inhabited Tenements, January, 1959	..	..	..	85,646
Number of Empty Houses, January, 1959	..	..	..	686
Rateable Value at 1st April, 1958	..	..	..	£4,179,360
General Rate for the year, 1958-59	..	..	..	19/5 in £

					England and Wales
Birth-rate	..	..	..	..	16.4
Death-rate	..	..	..	..	11.7
Infant Mortality (per 1,000 Births)	..	..	..	..	22.5

(Registrar-General's Figures)

*To the Chairman, the Lord Mayor, and the Members of the
City Health Committee*

Mr. Chairman, My Lord Mayor, Ladies and Gentlemen,

I have the honour to submit herewith the Annual Report on the Health of Leicester for the year 1958, the one hundred and tenth report of the series and my own twenty-fourth Annual Report.

Once again, I have to report an estimated decrease in the City population figure. The estimated population for mid-1958 was 277,700, a drop of 3,500 since the previous year, though there were 1,107 more births in the year than there were deaths. It is obviously desirable that the City boundaries should be reconsidered as soon as possible.

The birth-rate was much the same as in the previous year, 16.0 compared with 15.7, and there was a somewhat similar death-rate, 12.0 compared with 11.3.

The infant mortality rate, which in the previous year had achieved a low record, had a set-back in 1958. This is very unfortunate and the reasons for it are fully discussed in the Maternity and Child Welfare Section of this Report.

Perhaps the most important advance in the year under review has been the adoption of poliomyelitis vaccination on a large scale. Over 200 cases of poliomyelitis have occurred in Leicester in the last ten years, with ten deaths, so it is very satisfactory to know that a safe and reasonably efficient preventive measure is now available. Over 80,000 injections of vaccine were given to children and others during the year. The normal course consists of two injections into the upper left arm at an interval of three weeks, now followed by a third injection at an interval of not less than seven months. It is hoped that approximately 80% of those inoculated will receive complete immunity against the disease. The campaign has given an enormous amount of extra work to many sections of the Department and I am most grateful for the wonderful response given by the staff to the appeal for help and by the public in accepting vaccination.

Dr. Ross, my Deputy Medical Officer of Health, left us in April, 1959, and though this was not in the year now under review, I feel I must in this report refer to him and thank him for the excellent service

he gave to Leicester during the eight and a half years he was with us. He has, as usual, contributed several of the sections of this report, and I am most grateful to him, not only for this, but also for the devoted service he gave over so many years. We all thank him and wish him a very happy and successful career in the Public Health Service.

The highlight of the year occurred on the 9th May, 1958, when the city had the honour of a visit by H.M. the Queen, accompanied by H.R.H. the Prince Philip. It gave us all much pleasure to see you, Sir, our Chairman, and our Lord Mayor, receiving them and making them welcome. I include a photograph of this Royal visit as a happy memento of a great occasion.

I have often said in the opening letters to the many reports I have submitted to you, how fortunate I feel in the staff of the Department and in the co-operation and interest shown by you and your Committee, Sir. I would repeat that statement again this year.

I am,

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

E. K. MACDONALD, O.B.E., M.D., B.S., D.P.H.

Medical Officer of Health

Health Department,
Grey Friars,
Leicester,
(Tel. No. 25326)
29th May, 1959



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ANNUAL REPORT 1958

SECTION A

Statistics of the Area

Population

The Registrar-General estimates the population of the City of Leicester at mid-1958 as 277,700.

In 1954, four years ago, the City population was 287,300—thus in four years the population has decreased by nearly 10,000.

Birth-rate

The number of live births registered during 1958 was :

Males ..	..	..	..	2,282 (2,315)
Females	..	..	..	2,158 (2,112)
Total ..	..	..	..	4,440 (4,427)
Birth-rate	..	..	..	16.0 (15.7)
Standardised birth-rate	..	..	..	16.15 (15.7)

(Note : The comparative figures for 1957 are those in brackets)

Of the 4,440 total births, 321 (161 males and 160 females) were illegitimate as compared with 298, 155 and 143 respectively for 1957. Illegitimate births were 7.23% of the total births as against 6.7% in 1957.

Stillbirths

There were 97 stillbirths (56 males and 41 females) as compared with 87, 54 and 33 respectively in 1957.

Infant Mortality

In 1958 the infant mortality rate was 25.45 (legitimate 25.25 and illegitimate 28.04) as compared with 17.6 in 1957. This unfortunate increase in this important rate is discussed by Dr. Rees in his Report on the Maternity and Child Welfare Service.

The total number of infant deaths was 113.

The main causes of infant deaths as recorded by the Registrar-General were :

	1958			1957		
	Male	Female	Total	Male	Female	Total
Congenital malformations	9	19	28	10	7	17
Other defined and ill-defined diseases ..	29	29	58	20	25	45
Pneumonia	9	8	17	3	3	6
Various	8	2	10	7	3	10
	—	—	—	—	—	—
	55	58	113	40	38	78
	—	—	—	—	—	—

Marriages

The number of marriages in Leicester in 1958 was 2,350, of which 1,130 were in the Church of England register and 1,220 otherwise.

Death-rate

The total number (corrected) of deaths was 3,333 (3,172), namely 1,650 (1,572) males and 1,683 (1,600) females.

The death-rate was therefore 12.0 compared with 11.3 in 1957. The standardised death-rate for 1958 was 12.36.

2,261 persons (67.8% of the total) died after they reached their 65th birthday, and 1,411 reached the age of 75 and over.

The detailed causes of death will be found in Table 2, from which the following extracts are taken :

Heart and Vascular Disease

Under this heading are grouped the following main causes of death : vascular lesions of the central nervous system ; coronary disease ; hypertension with heart disease ; other heart disease ; other circulatory disease.

Of the 3,333 total deaths, 1,811 (54%) were assigned to these causes compared with 1,687 (53.0%) in 1957. Of the 1,811 deaths, 851 were males and 960 females.

Cancer

There were 619 deaths from this cause—308 males and 311 females, compared with 587, 317 and 270 respectively for 1957. All types of malignant disease, except cancer of the stomach, and leukaemia, showed a slight increase.

Tuberculosis

Once again I can report improvement. There were 25 deaths in all in 1958, as compared with our previous best—29 in 1957. 15 men and 5 women died from respiratory tuberculosis, 3 males and 2 females from other tuberculosis. This continued decrease in mortality is very pleasing. In 1947, only 11 years ago, we lost 207 persons from this disease.

Other Causes of Death in 1958

			Males	Females	Total	1957
Pneumonia	..	..	78	75	153	128
Bronchitis	..	..	105	55	160	155
Diabetes	..	..	3	16	19	17
Peptic ulcer	..	..	22	6	28	22
Kidney disease		..	14	10	24	33
Road accidents		..	26	13	39	30
Other accidents		..	34	42	76	83
Suicide	..	..	25	12	37	30
Influenza	..	..	3	4	7	37

See Table 2 for more detail

INFECTIOUS DISEASE—MORBIDITY AND MORTALITY

Measles

3,626 cases of this disease were notified in 1958, compared with 3,456 cases in 1957. 2,305 of the 1958 cases occurred in the first quarter of the year and were an overflow from the 1957 epidemic. There was no death.

Scarlet Fever

It was a year of average incidence—464 cases with no death occurring in 1958, as compared with 301 and no death in 1957.

Whooping Cough

327 cases were notified and there was no death, as compared with 604 cases and one death last year.

Diphtheria

Again I have to report no cases and no death from this disease.

PROTECTION PROCEDURES DURING 1958

	<i>Under 5</i>	<i>Over 5</i>	<i>Total</i>
Number of children immunised against diphtheria only	71	14	85
Number of children re-immunised against diphtheria only	23	121	144
Number of children vaccinated against whooping cough only	1	7	8
Number of children immunised against diphtheria and vaccinated against whooping cough jointly	3,393	70	3,463
Number of children re-immunised against diphtheria and re-vaccinated against whooping cough jointly	230	296	526
Number of persons vaccinated against smallpox ..	342	381	723
Number of persons re-vaccinated against smallpox	7	458	465

Poliomyelitis

Six cases occurred—five paralytic and one non-paralytic. This compares with the following numbers during the last few years :

1950 ..	79 cases	42 paralytic	4 deaths
1951 ..	13 „	9 „	1 death
1952 ..	4 „	3 „	No death
1953 ..	19 „	15 „	1 death
1954 ..	8 „	4 „	No death
1955 ..	13 „	4 „	„ „
1956 ..	1 case	— „	„ „
1957 ..	58 cases	32 „	3 deaths
1958 ..	6 „	5 „	1 death

Two of the cases occurred in January, one in February, one in March, one in April, and one in October, and their ages were :

1 aged 1 year	1 aged 7 years
1 aged 2 years	1 aged 26 years
1 aged 6 years	1 aged 54 years

Single stool specimens from 27 family contacts were examined at the Public Health Laboratory for the presence of poliomyelitis virus with the following results :

Contacts	No. examined	Positive	Negative
Adults	10	—	10
Children	17	12	5

There was one death—a boy aged seven years, who died in February.

Vaccination against Poliomyelitis

By the end of 1958 the following individuals had received a course of two injections of poliomyelitis vaccine :

	No. of persons
Children up to 15 years of age	37,156
Expectant mothers	450
Families of general medical practitioners ..	93
Families of ambulance personnel	54

In addition, 3,327 persons had received their first dose of vaccine and were awaiting the second dose at the end of the year.

2,539 persons, included among the above categories, having had two injections of vaccine, had also received the third injection by the end of 1958.

A large number of people were most helpful and co-operative in arranging and assisting at the numerous special sessions at schools and elsewhere for poliomyelitis vaccination. I am most grateful to the teaching staff of the schools for the help they gave. I would also like to say a special word of praise to the staffs of the Health and School Health Service Departments for the way in which the work was carried out.

SONNE DYSENTERY

As in 1957, there were many fewer cases of dysentery last year compared to other recent years, in 1958 there being 40 patients who had symptoms of dysentery and from whose motions the organism of dysentery was recovered on bacteriological examination—clinical dysentery confirmed. In 1957 there were 53 such cases and in 1956 there were 602.

This reduction in cases is apparently a true reduction and does not seem to be due to some cases being missed in 1958 compared to earlier years, as few of the stool specimens examined from notified cases and doubtful cases of dysentery during the year were positive.

The table below gives the numbers of different types of case according to age and includes the totals in 1957 and 1956 :

	Under 1 month	1-5 mths.	6-11 mths.	1-4 yrs.	5-14 yrs.	15-44 yrs.	45-64 yrs.	65+ yrs.	Total 1958	Total 1957	Total 1956
Clinical dysentery con- firmed	-	1	-	13	15	10	1	-	40	53	602
Clinical dysentery—no specimens taken ..	-	-	-	1	-	7	1	1	10	11	72
Clinical dysentery—speci- mens taken—negative ..	-	2	8	37	35	50	8	16	156	115	615
Symptomless excreters ..	-	1	-	2	4	5	-	-	12	49	479

The reduction from 1956 is very striking.

There was no particular outbreak during the year, the cases occurring singly or as small groups in different families.

The source of infection is given in the next table. It will be noted that as far as we were aware no spread took place among children at school :

	Source of Infection						
	Day Nursery	School	Family	Other	Unknown	Total	
Clinical dysentery confirmed ..	2	-	10	-	28	40	
Symptomless excreters ..	-	-	11	-	1	12	

Patients usually became clear in a few weeks, but one took eight weeks to become free from infection and another eleven :

	Weeks to Clear											Un- known	Total
	1	2	3	4	5	6	7	8	9	10	11		
Clinical dysentery confirmed ..	-	16	10	5	2	3	2	1	-	-	1	-	40
Symptomless excreters ..	-	2	7	1	-	1	-	-	-	-	-	1	12

FOOD POISONING, 1958

This year there were 147 cases of food poisoning. In addition there were 77 individuals who were found to be passing the organism of food poisoning when tested as family and work contacts of positive cases. The following table gives brief details of the outbreaks :

Where outbreak occurred	Month	No. of cases notified	Otherwise ascertained	Symptomless excretors	Organism
Private house	April	—	5	1	Salm. typhi-murium
„	May	1	—	2	„ „
„	June	—	5	—	„ „
„	„	—	1	3	„ „
„	„	—	1	1	„ „
„	„	27	14	29	„ wangata
„	July	—	1	1	„ typhi-murium
Hospital	„	19	21	21	„ „
Private house	August	2	—	1	„ thompson
„	„	—	1	2	„ bredeney
„	„	—	2	—	„ typhi-murium
„	„	—	1	1	„ „
„	September	1	—	2	„ „
„	„	1	—	2	„ „
„	„	—	2	1	„ newport
„	„	—	1	2	„ typhi-murium
„	„	—	1	2	„ „
„	October	1	—	2	„ heidelberg
„	„	1	—	1	„ typhi-murium
„	November	—	1	1	„ „
„	„	—	1	2	„ „
		—	—	—	
		53	58	77	
		—	—	—	

In addition there were 36 single cases :

Salm. typhi-murium	..	..	32
„ newport	..	..	1
„ st. paul	..	..	1
„ panama	..	..	1
„ paratyphoid B	..	..	1

The Memorandum on Food Poisoning (Memo. 188/Med.) reissued by the Ministry of Health in 1958, now makes provision for “Salm. Infection, not food-borne” in the returns required by the Ministry. It is not considered that there were any such outbreaks in Leicester during 1958.

With two exceptions the 21 outbreaks were all small, one or two persons in a family developing diarrhoea due to salmonella, and routine testing of other members of the family usually showing one or two individuals to be passing the organism in their motions.

Of the two larger outbreaks one was due to *Salm. wangata* ; the other to *Salm. typhi-murium*.

Salm. wangata was first isolated in the Belgian Congo in 1953 and has been isolated in this country only three times before—in 1953 from a sub-phrenic abscess in a child following appendicitis and in 1958 from a child aged two with diarrhoea in Liverpool and from a healthy carrier there.

The Leicester outbreak began on the 3rd June. The following table gives details of the cases and symptomless excretors :

Total notified—27. Total ascertained—41. Fatal—1

(Including those notified).

Symptomless excretors—29 (1 case and 2 symptomless excretors occurred in Barrow-on-Soar R.D.C., Leicestershire, and are included in the above).

				Symptomless		Total
				Cases	excretors	
Adults—Male	..	..	..	20	6	26
Female	..	..	..	15	17	32
Children—Male	..	..	..	3	2	5
Female	..	..	..	3	4	7
				—	—	—
				41	29	70
				—	—	—
Number of cases admitted to hospital	..			10	1	11
Number of cases treated at home	..			18	—	18
Number infected in hospital	..	..		12	12	24
Family contacts	..	..	..	1	14	15
Meat shops and factory	..	..		—	2	2

Fourteen cases had severe symptoms, the others being mild. One case went on to ulcerative colitis ; one had a gangrenous appendix and *Salm. wangata* was isolated on several occasions from the wound, but not from the faeces ; the organism was isolated from the conjunctiva of one of the moderately severe cases.

Questioning of the patients pointed to sausages and prepared meats from one particular factory being the vehicles of infection.

Specimens of various meats, sausages and sausage ingredients were examined and all were negative. Dr. Mair at the Public Health Labora-

tory recovered *Salm. wangata* from a swab from a basin and another from a table used in preparing sausages. All the food handlers in the factory were tested and one was found to be a carrier of *Salm. wangata*. She prepared faggots and did not come into contact with the meat or ingredients used for making sausages which, in view of *Salm. wangata* having been found on the mixing bowls, were presumed to have been the vehicle of infection in some cases. Four other individuals were found to be symptomless excretors of salmonellae—one *Salm. dublin*, one *Salm. seftenberg* and two brothers living at different addresses *Salm. manhattan*. Stools were also examined from the staffs of two butchers' shops from where meat products had been sold to more than one case. All four of the staff of one shop were clear. One of the two butchers at the other shop was found to be infected with *Salm. wangata*.

No other cases occurred in the country last year and the origin of *Salm. wangata* on the mixing basins and the source of infection of the carrier were not found.

The outbreak of 19 cases and 21 symptomless excretors occurred in a local hospital.

One most interesting finding during the year was the isolation of *Salm. typhi-murium* from the soil of a small backyard garden approximately 7 ft. 6 in. by 4 ft. One of the children living in the house was found to be a symptomless excreter of *Salm. typhi-murium* when a specimen of stool was examined for the poliomyelitis virus survey—such specimens also being examined for dysentery and salmonella organisms as well as for virus.

On investigation of the case it was found that her two brothers had had diarrhoea and fever a fortnight before. No particular food was found as the vehicle of infection but about a week before the children became ill, the father had dug a drum of cow manure into the garden on which the children played. This manure had been kept in a drum nearby for nearly two years.

Surface samples of soil were examined for salmonellae and *Salm. typhi-murium* was recovered up to February, 1959, when three sets of negative specimens were obtained. The soil remained positive for 40 weeks. When the garden soil was found positive it was fenced off to prevent access and apart from those taking the samples and the father who sowed grass seed on it in June, it is unlikely that anyone had been on it. There was no evidence of rodent infestation in the area nor of soiling by dogs or cats. One specimen of cat or dog faeces found on the garden on one occasion did not show salmonella.

It seems probable that the children were first infected by an unknown food and thence infected the garden. This is more likely than that the cow manure was responsible though if *Salm. typhi-murium* remained in soil for about a year, could it have lived in the manure for two years ?

The age and sex incidence of the salmonella infections was as follows :

			Male	Female	Total
0-11 months	..	..	2	3	5
1-4 years	..	..	10	10	20
5-14 years	..	..	9	10	19
15+ years	..	..	44	59	103
			—	—	—
Total	..	..	65	82	147
			—	—	—

The times in weeks before cases produced negative specimens of stool were as follows :

Weeks to clear										
1	2	3	4	5	6	7	8	9	10	11
3	13	16	14	10	3	6	2	2	6	6
12	13	14	19	20	28	32	33	48	Unknown	
1	3	4	1	2	2	1	1	1	50	

Details of the larger clearance times are :

20 weeks to clear—	<i>Salm. typhi-murium</i> , 1 of which is still positive									
28	„	„	—1 <i>Salm. typhi-murium</i> , 1 <i>Salm. wangata</i> (<i>Salm. wangata</i> still positive)							
32	„	„	— <i>Salm. dublin</i> —still positive							
33	„	„	— <i>Salm. wangata</i> —still positive							
48	„	„	— <i>Salm. typhi-murium</i>							

TABLE 1

Showing estimated Population, Birth-rates and Death-rates (General and Zymotic) per 1,000 living during the last 40 years—1919-1958

Year	Estimated Population	Birth-rate	Death-rate	Zymotic Death- rate	Infant Mortality
1919	236,059	15.3	13.0	.3	98.0
1920	236,874	24.9	12.1	.8	89.4
1921	237,900	22.4	12.0	.5	85.9
1922	238,240	19.5	12.7	.5	87.8
1923	238,580	19.2	11.6	.4	84.0
1924	238,920	18.3	12.3	.7	79.0
1925	239,260	17.5	13.1	1.3	87.6
1926	239,600	17.2	12.4	.7	77.4
1927	239,940	16.5	12.7	.5	75.1
1928	240,280	16.6	11.4	.2	70.7
1929	240,620	15.6	14.2	1.3	80.3
1930	240,960	16.1	11.4	.4	55.7
1931	241,300	15.3	12.4	.5	63.7
1932	240,800	14.9	12.5	.8	70.0
1933	241,500	13.4	12.8	1.0	74.6
1934	241,100	14.2	11.7	.4	52.7
1935	261,000	13.9	11.6	.4	59.4
1936	261,800	14.5	11.6	.3	58.4
1937	262,900	14.5	12.5	.8	62.5
1938	263,300	14.7	11.2	.4	45.9
1939	262,900	13.9	11.5	.4	49.1
1940	259,400	13.9	14.5	.4	51.2
1941	265,310	13.9	12.2	.4	55.0
1942	259,400	16.7	11.2	.4	50.6
1943	254,800	18.6	12.8	.5	48.5
1944	257,450	20.3	11.9	.3	39.0
1945	256,960	19.2	12.2	.4	54.3
1946	269,320	21.0	12.2	.5	53.7
1947	275,830	21.9	12.2	.4	47.2
1948	280,300	19.1	10.8	.45	38.3
1949	283,400	17.9	11.6	.59	23.8
1950	287,520	16.4	11.5	.58	29.5
1951	284,700	16.2	12.4	.09	25.2
1952	285,900	15.9	11.4	.09	24.2
1953	286,500	16.0	11.2	.20	24.8
1954	287,300	15.3	11.2	.09	27.2
1955	286,300	14.8	12.0	.15	23.4
1956	284,000	15.4	11.3	.11	19.7
1957	281,200	15.7	11.3	.19	17.6
1958	277,700	16.0	12.0	.086	25.45

TABLE 2—CAUSES OF DEATH

CLASSIFICATION	Sex	All Ages	0—	1—	5—	15—	45—	65—
TOTAL DEATHS	M	1650	55	11	10	75	479	1020
	F	1683	58	6	5	61	312	1241
1. Tuberculosis of Respiratory System	M	15	—	—	—	1	10	4
	F	5	—	—	—	1	3	1
2. Other forms of Tuberculosis	M	3	—	—	—	1	—	2
	F	2	—	—	—	—	1	1
3. Syphilitic Disease	M	8	—	—	—	—	6	2
	F	2	—	—	—	—	1	1
4. Diphtheria	M	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—
5. Whooping Cough	M	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—
6. Meningococcal Infections	M	1	—	1	—	—	—	—
	F	2	1	1	—	—	—	—
7. Acute Poliomyelitis	M	1	—	—	1	—	—	—
	F	—	—	—	—	—	—	—
8. Measles	M	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—
9. Other Infective and Parasitic Diseases	M	1	—	—	—	1	—	—
	F	2	—	1	—	—	—	1
10. Cancer of Stomach	M	44	—	—	—	3	16	25
	F	32	—	—	—	2	7	23
11. Cancer of Lung and Bronchus	M	102	—	—	—	3	55	44
	F	19	—	—	—	1	11	7
12. Cancer of Breast	M	—	—	—	—	—	—	—
	F	74	—	—	—	5	38	31
13. Cancer of Uterus	F	37	—	—	—	7	19	11
14. Other Malignant and Lymphatic Neoplasms..	M	159	—	3	—	10	46	100
	F	139	—	1	1	5	46	86
15. Leukæmia, Aleukæmia	M	3	—	—	—	—	1	2
	F	10	—	—	—	2	5	3
16. Diabetes... ..	M	3	—	—	—	1	—	2
	F	16	—	—	—	2	2	12
17. Vascular Lesions of Nervous System	M	265	—	—	—	5	53	207
	F	380	—	—	—	6	47	327
18. Coronary Disease, Angina	M	310	—	—	—	8	117	185
	F	153	—	—	—	—	28	125

TABLE 2 (continued)—CAUSES OF DEATH

CLASSIFICATION	Sex	All Ages	0—	1—	5—	15—	45—	65—
19. Hypertension with Heart Disease	M	42	—	—	—	—	11	31
	F	52	—	—	—	—	6	46
20. Other Heart Disease ..	M	177	—	—	—	2	26	149
	F	312	—	—	—	6	28	278
21. Other Circulatory Disease	M	57	—	—	—	2	21	34
	F	63	—	—	—	2	8	53
22. Influenza	M	3	—	—	—	1	2	3
	F	4	—	—	—	—	1	3
23. Pneumonia	M	78	9	2	1	3	12	51
	F	75	8	1	1	2	10	53
24. Bronchitis	M	105	2	—	—	2	36	65
	F	55	—	1	—	2	8	44
25. Other Diseases of Respiratory System	M	10	—	—	—	—	3	7
	F	4	—	—	—	1	1	2
26. Ulcer of Stomach and Duodenum	M	22	—	—	—	—	7	15
	F	6	—	—	—	—	1	5
27. Gastritis, Enteritis and Diarrhœa	M	8	2	—	—	—	2	4
	F	6	14	—	—	—	1	5
28. Nephritis and Nephrosis	M	14	—	—	—	1	7	6
	F	10	—	—	—	1	5	4
29. Hyperplasia of Prostate	M	16	—	—	—	—	2	14
30. Pregnancy, Childbirth, Abortion	F	1	—	—	—	1	—	—
31. Congenital Malformations	M	12	9	1	—	1	1	—
	F	22	19	—	—	—	2	1
32. Other Defined and Ill-defined Diseases	M	103	29	2	1	6	24	41
	F	132	29	—	2	6	26	69
33. Motor Vehicle Accidents	M	26	—	1	4	10	4	7
	F	13	—	1	1	4	1	6
34. All Other Accidents ..	M	34	3	1	2	6	6	16
	F	42	1	—	—	3	2	36
35. Suicide	M	25	—	—	—	7	11	7
	F	12	—	—	—	1	4	7
36. Homicide and Operations of War	M	3	1	—	1	1	—	—
	F	1	—	—	—	1	—	—

TABLE 3
MUNICIPAL WARDS. VITAL STATISTICS, 1958
(Calculated locally)

	DEATHS					Infant Mortality per 1,000 live births	Births
	0 to 1 year	1 to 5 years	5 to 65 years	Over 65 years	Total all ages		
1. St. Margaret's	2	1	42	102	147	9.8	204
2. Latimer	8	3	63	159	233	33.2	241
3. Charnwood	2	1	47	128	178	9.0	222
4. Spinney Hill	5	2	48	185	240	24.9	201
5. Wycliffe	10	—	46	129	185	31.3	320
6. Castle	3	2	31	105	141	20.0	150
7. Westcotes	9	1	76	251	337	34.7	259
8. Newton	10	1	69	115	195	32.2	311
9. Abbey	10	3	66	138	217	26.8	373
10. Belgrave	10	1	69	151	231	41.0	244
11. Humberstone	8	1	61	141	211	26.1	306
12. Evington	6	1	47	85	139	22.5	267
13. Knighton	4	—	63	190	257	17.6	227
14. De Montfort	9	1	59	117	186	31.8	283
15. Aylestone	9	1	73	135	218	27.4	329
16. North Braunstone	6	—	67	104	177	20.4	294
Unknown	—	—	1	—	1	—	—

(Local Figures)

TABLE 4

Showing the number of Deaths from certain Infectious Diseases in the Fifteen Years 1944-1958

Disease	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958
Measles	0	5	1	5	0	1	3	2	2	0	0	0	0	0	0
Scarlet Fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Diphtheria	6	1	1	0	1	0	0	1	0	0	0	0	0	0	0
Whooping Cough	4	2	3	2	1	5	3	2	2	2	0	1	0	1	0
Diarrhoea } Under two															
Enteritis } years of age	25	43	76	83	19	6	7	5	5	4	4	2	2	1	2
Influenza	16	20	26	9	4	16	4	117	7	29	3	25	16	37	7
Puerperal Fever	3	1	1	0	0	3	3	0	0	0	0	0	0	0	0
Cerebro-Spinal Fever	1	2	4	2	3	1	2	2	0	4	4	0	0	0	1
Polio-myelitis	0	0	0	1	0	3	4	1	0	1	1	0	0	3	1
Encephalitis Lethargica	1	2	1	6	4	4	1	0	0	1	0	0	0	0	0
Pneumonia	112	147	148	146	93	128	99	137	114	128	99	148	113	128	153

TABLE 5. DEATHS FROM CANCER, 1958
(TOTAL 604)
 (Calculated locally)

Tabulated as to Age, Sex and Organ Affected,
in accordance with local classification

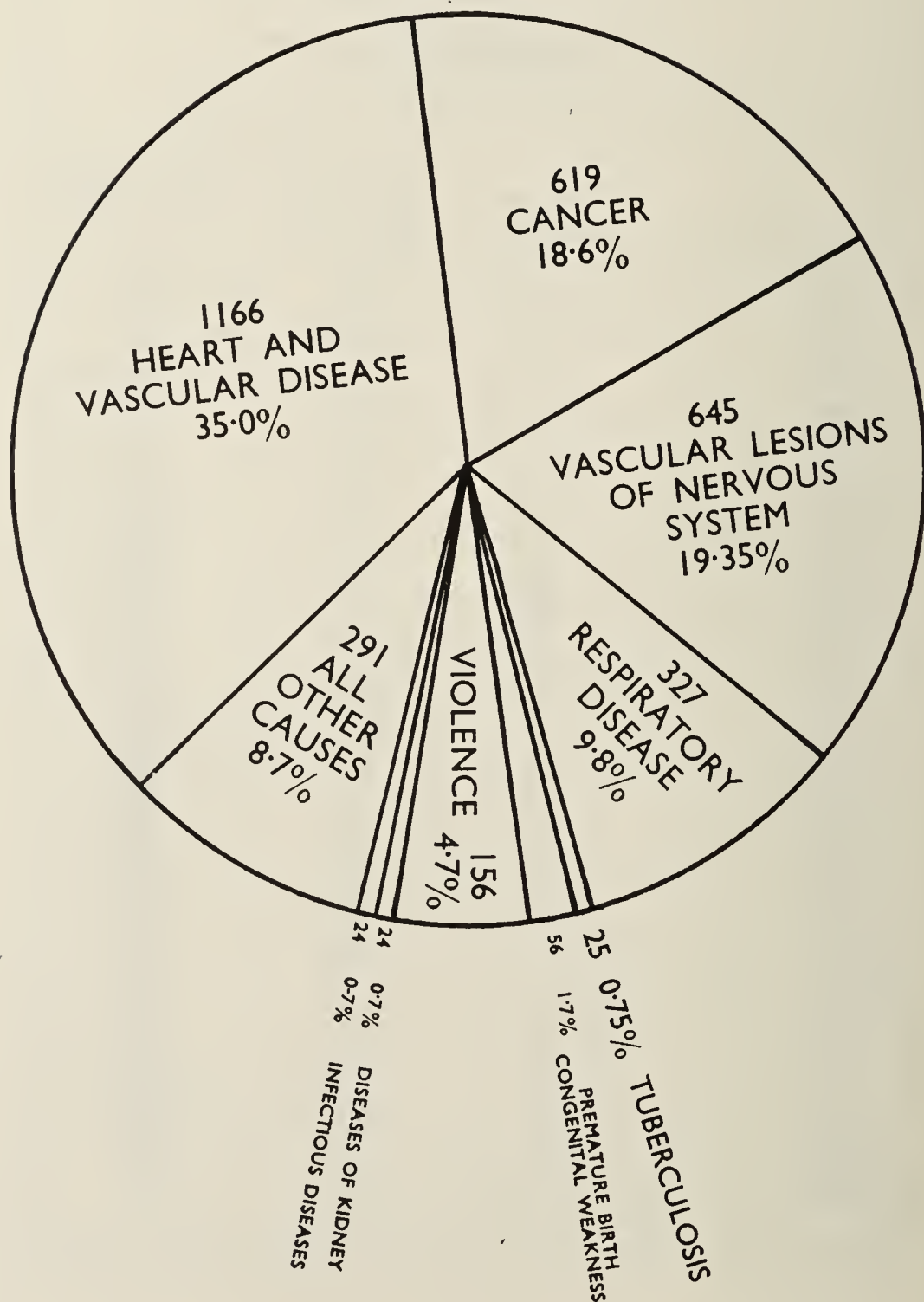
Organ Affected	Under 35 years		35-65 years		Over 65 years		All Ages	
	M.	F.	M.	F.	M.	F.	M.	F.
Lip	—	—	—	—	—	—	—	—
Tongue	—	—	—	—	3	—	3	—
Jaw	—	—	—	—	—	—	—	—
Mouth	—	—	1	—	—	1	1	1
Larynx	—	—	1	—	1	—	2	—
Oesophagus	—	—	—	—	6	8	6	8
Stomach	—	—	20	6	23	22	43	28
Intestines	—	—	—	1	—	—	—	1
Colon	—	1	5	19	15	26	20	46
Rectum	—	—	9	5	20	14	29	19
Liver	1	—	1	3	6	3	8	6
Pancreas	1	—	6	1	5	7	12	8
Lymphosarcoma	}	—	1	—	5	—	6	—
Reticulosarcoma								
Lungs	—	—	66	14	36	6	102	20
Kidney	1	1	1	1	1	—	3	2
Bladder	—	—	6	1	13	3	19	4
Prostate	1	—	4	—	18	—	23	—
Testicle	—	—	—	—	—	—	—	—
Ovary	—	1	—	10	—	7	—	18
Uterus	—	2	—	23	—	10	—	35
Breast	—	—	—	42	—	30	—	72
Bones	—	—	2	—	—	1	2	1
Leukaemia	}	1	2	8	2	3	4	12
Aleukaemia								
Other Forms or not specified ..	3	1	11	7	5	13	19	21
Total ..	7	7	136	141	159	154	302	302

TABLE 6
CANCER STATISTICS, 1928-58
(Calculated locally)

Year			Total Cancer Deaths	Cancer Deaths —per cent. of Total Deaths	Cancer Death- rate per 100,000 Population
1928	..	..	349	12.7	142
1929	..	..	357	10.4	145
1930	..	..	372	13.5	151
1931	..	..	357	11.9	148
1932	..	..	356	11.8	148
1933	..	..	367	11.9	152
1934	..	..	377	13.3	156
1935	..	..	384	12.9	150
1936	..	..	392	12.9	150
1937	..	..	366	11.2	139
1938	..	..	417	14.1	158
1939	..	..	423	14.0	161
1940	..	..	447	11.9	172
1941	..	..	471	14.5	177
1942	..	..	465	15.9	179
1943	..	..	487	15.0	191
1944	..	..	519	16.9	202
1945	..	..	496	15.9	193
1946	..	..	504	15.3	187
1947	..	..	492	14.7	178
1948	..	..	526	17.4	188
1949	..	..	509	15.5	180
1950	..	..	561	16.9	195
1951	..	..	579	16.4	203
1952	..	..	593	18.2	207
1953	..	..	527	16.4	184
1954	..	..	583	17.9	202
1955	..	..	542	15.8	189
1956	..	..	566	17.7	199
1957	..	..	584	18.4	209
1958	..	..	604	18.3	217

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES, 1958

TOTAL DEATHS, 3,333



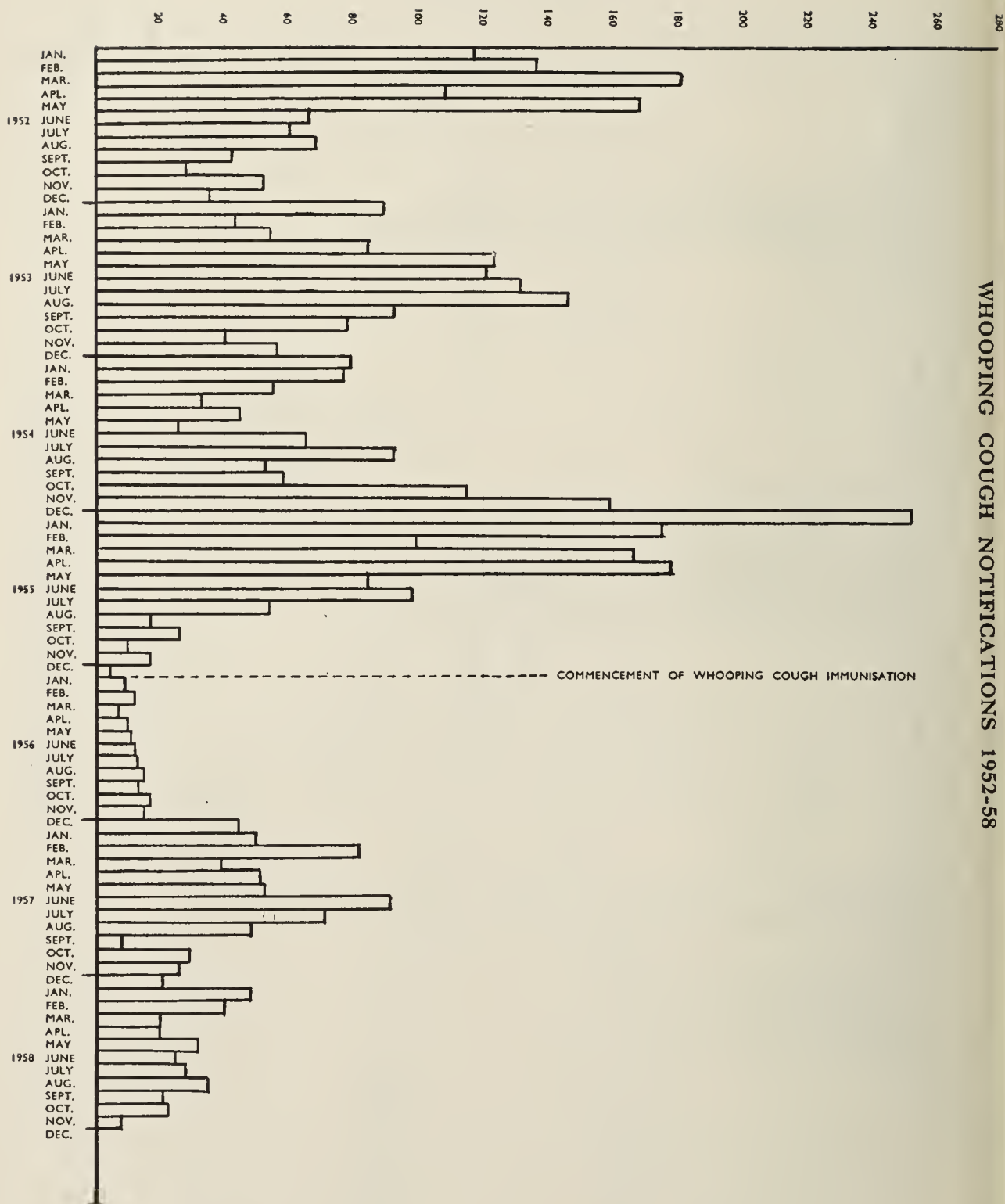
NOTIFICATIONS PER MONTH

MEASLES NOTIFICATIONS 1952-58

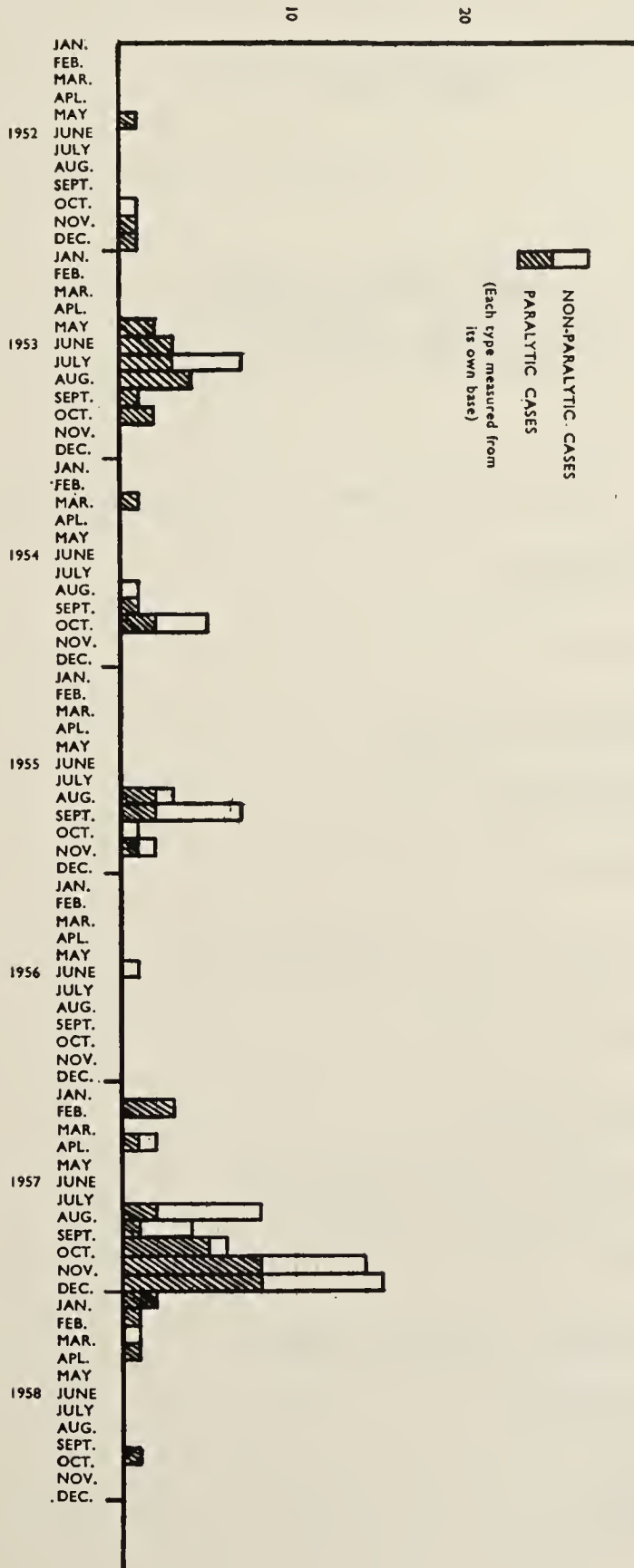


WHOOPING COUGH NOTIFICATIONS 1952-58

NOTIFICATIONS PER MONTH



CONFIRMED CASES PER MONTH



CONFIRMED CASES OF POLIOMYELITIS 1952-58

SECTION B

Miscellaneous Health Services

In this Section reports will be found on the following services :

- (a) Water Supplies
- (b) Cremation
- (c) City Ambulance Service
- (d) Mental Health Service
- (e) Home Nursing Service
- (f) Care and After-Care, Health Education
- (g) Home Help Service
- (h) Venereal Disease
- (i) Section 47, National Assistance Act
- (j) Children, neglected or ill-treated in their own homes
- (k) Prevention of break-up of families
- (l) Blind Persons
- (m) Housing

WATER SUPPLIES

I am indebted to Mr. H. Wallhouse, M.I.C.E., M.ASCE., M.I.W.E., A.M.I.Mech.E., Water Engineer, for the following report on the work of his Department during 1958.

Mr. Wallhouse reports as follows :

“(a) The water supply in the statutory area has been of good quality throughout the year ; no restrictions on consumption have had to be imposed, but the ban on the use of hose pipes for watering private gardens and washing private cars remained in force.

On the 1st October, 1958, the statutory area was increased by the addition of the following areas :

In the R.D. of Barrow-upon-Soar : The Parishes of Quorn-don and Ulverscroft ; no resources were taken over in connection with these two Parishes.

In the R.D. of Billesdon : The whole of the area which was not formerly in the Leicester Water Area. Apart from a few private supplies the only public supply taken over was from a bore hole for the supply of the village of Allextton. A large part of the added area was already supplied from the Leicester resources in bulk.

In the R.D. of Lutterworth : The whole of the area which included two sources of supply from underground springs and drains, one at Misterton and one at Ullesthorpe.

In the R.D. of Market Harborough : That part which was not formerly in the Leicester Water Area. Two parishes in this area are supplied from the resources of the Mid-Northants Water Board and three parishes are supplied from resources of the Market Harborough U.D.

“(b) Samples have been taken of raw and treated water from the local reservoirs, from the resources of the Mid-Northants Water Board and Misterton and Ullesthorpe supplies, and also of incoming water from the Derwent Valley. These have been both bacteriologically and chemically examined by the City Analyst and details of this work have been given by the Analyst himself in his section of the Report.

In brief, he approved as safe and satisfactory for drinking all samples of chlorinated water which were submitted, and reported that all filtered water would be satisfactory if subjected to terminal chlorination.

Apart from the tests made on waters from local works, analyses have also been made regularly of samples within the area of supply, including the areas taken over on 1st October, 1958. Again, the Analyst has reported favourably.

There are approximately 150,000 houses in the area supplied ; of these it is estimated that 1,200 are supplied through communal taps fixed in yards, and the population now supplied is estimated to be 446,000."

CREMATION

Mr. E. H. Marsh, Superintendent Registrar since 1945, retired in August, 1958. I would like to pay this final tribute of thanks to him for his unfailing courtesy and co-operation with us. I am sure we shall have an equally happy association with his successor, Mr. D. G. Clarke, to whom I am indebted for the following information, which is extracted from his Annual Report.

There are now 115 Crematoria in operation in Great Britain. A total of 2,277 cremations were carried out at our Crematorium in 1958, the highest figure yet recorded, bringing the total number of cremations to 20,871 since the Crematorium opened in 1902.

CITY AMBULANCE SERVICE

(Mr. J. E. OSWELL, F.I.C.A.P., Chief Ambulance Officer)

This is the tenth report upon the Ambulance Service since 1948 and will provide a useful occasion to study the achievements.

In 1948 the total number of patients conveyed to and from hospital by the Service was 36,661 and the total mileage travelled was 196,870, which gives an average miles per patient of 5.37. During the past year the total number of patients conveyed was 83,891 and the mileage travelled 320,750 which gives an average miles per patient of 3.82.

It was appreciated that once the free nature of the service became known the demand for transporting cases of illness and accidents would steadily grow. Despite this, however, the average miles per patient by road has now decreased from 5.37 in 1948 to 3.82 in 1958. This is very satisfactory, taking into consideration that a great deal more of the population of the town and also industry has now moved from the centre towards the city boundaries.

Another point to be brought to notice is that today the large congestion of vehicles now on the road in the city shopping area has necessitated the drivers having to avoid these parts and consequently increasing their mileage during peak periods in order to save time.

The Tables adjoining give the difference between the number of calls in 1957 and 1958 for various types of cases that have been dealt with, and the main points to be noted are :

1. The large increase of out-patients to 4,550.
2. The increase of 85 patients found dead-on-arrival, of which quite a number are road traffic accidents.
3. The large increase of 49 road traffic accidents.

Against these there has been a decrease of 356 admissions and transfers together with a decrease of 1,400 discharges and convalescent cases. It is pleasing to note also that there has been a decrease of 73 other accidents, which are mostly accidents within the home.

There has been very little change, however, in the rest of the work undertaken during the year.

Regarding patients conveyed by train, it will be seen that there has been a decrease of 80 patients conveyed by train this year. Unfortunately, the newly-introduced diesel train has no compartment with suitable privacy for a stretcher case. This has precluded their use by the Ambulance Service, who have now to carry such cases by road,

which is both more tiring for the patient and expensive to the community.

At present the Medical Officer and I are going into this to see what can be done to overcome this difficulty. We shall perhaps have more information to submit next year.

	Total Calls, 1958	Total Calls, 1957	Increase of 1958 over 1957	Decrease of 1958 from 1957
Out-patients	57,497	52,947	4,550	—
Admissions and Transfers	7,695	8,051	—	356
Discharges and Convales- cence	7,499	8,899	—	1,400
Maternity	1,443	1,444	—	1
Mental	114	83	31	—
Dead on Arrival ..	355	270	85	—
Infectious	136	141	—	5
Accidents (Road) ..	855	806	49	—
Accidents (Others) ..	1,652	1,725	—	73
Premature Cot	31	29	2	—
Other Authorities ..	90	102	—	12
Chargeable Transport ..	78	87	—	9
Gas and Air	3,588	3,563	25	—
Transport	1,880	1,892	—	12
Abortive	978	949	29	—
Total calls by road ..	83,891	80,988	2,903	—
Total mileage by road ..	320,750	315,471	5,279	—
Average miles per patient	3.823	3.895	—	.072
Patients by train ..	296	376	—	80
Mileage by train ..	35,295	44,901	—	9,606
Average miles per patient by train ..	119.2	119.4	—	.2

Home Nursing Service Transport

The Ambulance Service is still responsible for the repair and maintenance of this, and during the year it has been decided to use more cars in future instead of cyclemasters. Meetings have been held periodically of representatives of the nurses' homes, together with the Deputy Medical Officer of Health, Miss Ratcliffe, Miss Sills and myself ; these meetings have proved very successful and have solved many problems.

Mobile Clinic

The transporting of the mobile clinic to the large estates around the city boundaries is still being carried out by us. There have been one or

two changes of sites during the year. The chassis of the clinic has been converted from a two-wheel to a four-wheel chassis.

Two-Way Radio

Radio is still playing a big part in both the promotion of efficiency and the saving of miles. Despite the increase of 2,903 patients carried during the year and an increase of 5,279 miles covered by the Ambulance Service, it has been calculated that no less than 6,040 miles have been saved by the use of the radio link to redirect ambulances.

Gas and Air Apparatus

Delivery and maintenance is still carried out by the Service on behalf of the Maternity and Child Welfare Department. There has been an alteration that is not yet complete of the conversion of the 50-gallon cylinder machines to 100-gallon cylinder machines. It is hoped that this work will be completed at the commencement of next year.

Poliomyelitis Vaccination

A large proportion of members of the Service and their families have taken advantage of being vaccinated during the year.

Stevenson Minuteman Apparatus

A new piece of apparatus was purchased for applying artificial respiration to patients overcome by asphyxia. This is a great deal more up-to-date and a better piece of equipment than the apparatus used for the past few years.

Co-operation

Good co-operation still exists with the Leicester County Ambulance Service. The British Railways authorities in Leicester have again given excellent co-operation in the reservation of special compartments for the transport of patients by rail, even though short notice has had to be given in emergency cases.

Meetings between the senior officers of the Service and officers of the Royal Infirmary have taken place during the year, and two of our main difficulties have now been satisfactorily overcome.

1. It was agreed that the Infirmary porters would be responsible for moving patients within the Infirmary. This is working smoothly and saving time of ambulance personnel.
2. It has now been agreed for a two-way traffic system to be installed from Knighton Street entrance and a new exit to be opened at the junction of Infirmary Road. This work will not be completed until the middle of next year.

Visitors to the Ambulance Station

Three hundred and seventy-three people have visited the station during the year. The Chief Ambulance Officer has also given talks to various local organisations, explaining the work of the Service to 89 people. From time to time we are asked by the Leicester General Hospital and the Leicester Royal Infirmary to give a talk to administrative students. Amongst the prominent people who have visited the station during the year is Mr. Baj Pai of India. Also I have given film shows to about 260 people.

Air Training Corps—Cadets

I was asked to give a course (St. John Ambulance—preliminary first-aid) to the Leicester Air Training Corps cadets, over a period of eight weeks of two nights per week, and it is pleasing to report that all 15 boys were successful in obtaining their preliminary first-aid certificate.

First-Aid

Mr. Piggott and Mr. Lee, Station Officers of the Service, Driver McCafferty, Mr. Curbishley and myself were successful in obtaining a First-Aid Lay Instructor's certificate during the year.

The Visit of The Queen to Leicester

On the occasion of the visit of H.M. The Queen and H.R.H. The Duke of Edinburgh on the 9th May, 1958, special arrangements were made in conjunction with the police for manning the official route and giving adequate coverage for dealing with the large crowds of people on that occasion. Again wireless played a big part in mobilising ambulances from key points along the route. All patients were able to be dealt with, without delay. It was a very busy day for the Service, as we had to deal with our daily commitments in the usual way, but everything did go along quite smoothly.

Leicester University

The Installation on the 20th June of the Chancellor, Lord Adrian, in the De Montfort Hall and the reception which was held afterwards in Beaumont Hall and at the University necessitated special first-aid arrangements being made. Two rooms were set up as first-aid posts and staffed.

Municipal Buildings

Periodical checks are made of first-aid equipment at the main

Municipal buildings by the officers of the Service, and replacements were provided where necessary.

Civil Defence

Ambulance and casualty collecting training of part-time volunteers has been carried out as in the past two years.

Twenty-four volunteers have taken a full first-aid certificate. Also it is very pleasing to report that 11 volunteers have been successful in qualifying as local authority Civil Defence instructors; one of the peace-time ambulance drivers, Mr. McCafferty, qualified as a centrally trained Civil Defence instructor. This is due to the hard work carried out during the year by the Civil Defence instructor, Mr. P. Curbishley. The tuition of driving is still being carried out very successfully by the driving instructors on a voluntary basis.

Staff

There has been no change in the establishment of the staff during the year with the exception of a temporary painter who was engaged for a few months especially to carry out the painting of the buildings within the station.

Service Strength

			<i>Strength</i>	<i>Establishment</i>
			<i>31st Dec. 1958</i>	
Chief Ambulance Officer	..	..	1	1
Station Officers	..	..	2	2
Wireless Control Officer	..	..	1	1
Driver/Attendants	..	..	57	58
Female Attendants	..	..	8	10
Mechanics	..	..	4	4
Telephonist	..	..	1	1
Clerks	..	..	2	2
Canteen Assistant	..	..	1	1
Boiler-Handyman	..	..	1	1
Coachpainter	..	..	1	1
			—	—
			79	82
			—	—

Safe Driving Awards

In 1956 all drivers of the Service were successful in qualifying for safe driving awards. This was, of course, an outstanding achievement. This year eight men have failed to qualify, but when you take into consideration the amount of traffic now on the roads, I think this record

is extremely good, and is a tribute to the careful driving by members of the Service.

Vehicles

The present strength of the Service is as follows :

17 Ambulances	5 Sitting Case Ambulances
2 Sitting Case Cars	1 Service Van
5 Civil Defence Ambulances	

The Committee has now approved the introduction of a five-year replacement programme commencing in 1959. Five new ambulances are to be ordered during the next financial year 1959-60. Over the next five years 16 new ambulances will replace the 17 large ambulances now in use. In addition, the five sitting case ambulances will also be replaced.

Considerable investigation has been carried out and visits and tests made by both the Medical Officer of Health and myself, and it has been agreed that the standard Morris Commercial 30 cwt. forward control chassis with modified suspension and steering, fitted with petrol engine, be purchased.

In view of the progress that has been made with air suspension in U.S.A., Germany, Italy and Holland, it was obvious that air suspension would be in production on British commercial vehicles. Dunlop Rubber Company announced that they had converted a Commer 7-ton chassis to incorporate their own Pneuride air suspension units, but had not yet developed anything suitable for a 30-cwt. chassis.

After meetings with Dunlop's it was agreed they develop an air suspension suitable for a 30-cwt. chassis to give a softer and smoother ride for the patient and a variable rate suspension. Should this chassis prove successful, this type of suspension will be used on the rear wheels only, and standard semi-elliptic springs are to be replaced on the front axle by a special type softer spring designed in conjunction with the rear air suspension to give a balanced frequency. Six inch movable telescopic shock absorbers are used on both front and rear axles. These modifications will be used for all future ambulances.

The steering column has been moved forward approximately 4 in. allowing the driver's seat to be moved forward and backward to give more space for the driver and the interior of the ambulance.

The body is constructed of glass fibre reinforced plastic for mounting on the Morris L.D.2 chassis only. This body is a great deal lighter than

Vehicle "Calls" by Road :		1953	1954	1955	1956	1957	1958
City Ambulance Service	..	82,253	80,687	81,358	81,207	79,484	82,472
St. John Ambulance Committee	..	1,676	1,940	2,325	2,257	1,504	1,419
TOTALS	..	83,929	82,627	83,683	83,464	80,988	83,891
Mileage by Road :							
City Ambulance Service	..	386,018	349,727	320,812	312,881	310,105	315,446
St. John Ambulance Committee	..	5,491	6,244	7,646	7,305	5,366	5,304
TOTALS	..	391,509	355,971	328,458	320,186	315,471	320,750
Average Miles per Patient by Road		4.66	4.31	3.92	3.84	3.90	3.82
Patients Conveyed by Train :							
Patients conveyed by train	..	65	153	242	321	376	296
Number of miles travelled by train	..	12,862	23,278	31,625	38,590	44,901	35,295
Average miles per patient by train	..	197.9	152.1	130.7	120.2	119.4	119.2
Children Conveyed to and from the Occupation Centre :							
Children to and from the Occupation Centre	..	22,239	25,142	23,847	*6,563	—	—
Mileage	..	17,685	16,506	15,681	5,693	—	—
Average miles per child	..	.79	.66	.66	.87	—	—

*Seven months only

the normal coach type and as the weight will be lighter, we have been able to soften the suspension a great deal to the advantage of the patient.

Other advantages are that the plastic bodies require no painting ; the colour being impregnated during construction, any necessary repair work will be a great deal easier and cheaper to carry out. There is also no wood rot, as in a coachwork built body.

The proto-type now being constructed to our specifications is suitable both for use as a large two-berth stretcher ambulance and a sitting case ambulance.

The Chairman, Dr. Macdonald and myself have seen and tested this new type of ambulance and found it entirely satisfactory.

To conclude, I am sure that this has been a most progressive and satisfying year. What has been accomplished is in no small measure due to members of the Ambulance Sub-Committee, senior officers and staff of the Service for their encouragement and support which has been most warmly appreciated over the past ten years.

MENTAL HEALTH SERVICE

(Mr. S. A. GOODACRE, Chief Mental Health Officer)

Administration

To the members of the Council who combine and serve on the Mental Health Sub-Committee are added three co-opted members, one of whom is the Medical Superintendent of the Towers Mental Hospital representing No. 3 Hospital Management Committee, one represents the Local Medical Committee and one the Executive Council.

Meetings are bi-monthly and are usually convened at the Town Hall or at the Emily Fortey School.

The Medical Officer of Health is directly responsible for the administration of the Service. He is assisted by his deputy who also carries out periodic examinations of pupils at the Emily Fortey School and acts as ascertainment officer with reference to mental deficiency.

Staff at the Mental Health Department, Charles Street

The staff consists of the Chief Mental Health Officer, the Deputy Mental Health Officer, five Social Workers and two general clerk/typists.

The Chief, his Deputy and three of the social workers are designated Duly Authorised Officers. Of the two social workers not so authorised, one deals with the community care of the mentally ill and one with the supervision and community care of the mentally defective.

Staff at the Emily Fortey School

Full-time

Mrs. M. V. Taylor, Supervisor, her Deputy and four Assistant Supervisors ; two Male Handicraft Assistants, one Nursery Assistant and one Gardener/Handyman. (Mrs. Taylor and two of the Assistant Supervisors possess the N.A.M.H. Diploma).

Part-time

One Cook, one Assistant Cook and three Kitchen Assistants.

Two Dining Room Attendants, three Bus Attendants and two Cleaners.

Account of Work Undertaken in the Community

On 1st January, 1958, 375 community care mentally ill persons and 677 mentally defective supervision cases were brought forward from

1957. Because of the pressure of work with new referrals, it is estimated that contact was only properly maintained in approximately 25% of these.

During 1958 new referrals of mentally ill persons numbered 475, of which 288 were admitted to a Mental Hospital and 187 were dealt with in the community ; 65 of these were active community care cases on 1st December, 1958.

Mentally defective persons referred during 1958 numbered 64 and on 31st December we had 692 live supervision cases receiving community care.

Mental Illness

The following statistics show the changing manner of initial admissions over the past eight years. Only one patient was admitted in 1958 other than by the three methods indicated.

	1958	1957	1956	1955	1954	1953	1952	1951
Certified patients (Sec. 14, 15, 16 Lunacy Act, 1890) ..	12	48	68	66	108	145	146	129
Three-day Order (Sec. 20 Lunacy Act, 1890) ..	192	165	135	124	42	14	5	-
Voluntary (Sec. 1, Mental Treatment Act, 1930) ..	83	36	18	14	4	15	18	16
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	287	249	221	204	154	174	169	145
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

There were many more patients admitted to the Towers Hospital voluntarily than these figures show. The above numbers relate only to those patients where this department's officers participated in the admission.

Eventual outcome of the 192 patients initially admitted to hospital in accordance with Section 20 of the Lunacy Act, 1890 (Duly Authorised Officer's Three-day Order) :

	Became Voluntary Patients	Died	Discharged	Certified	Total
Within three days ..	76	3	6	2	87
After Sec. 21a action (14 days extension by Medical Superintendent) ..	85	6	6	5	102
After Sec. 21(1) action (14 days stay of action by Justice of the Peace) ..	1	2	-	-	3
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	162	11	12	7	192
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

Age groups of persons referred to the Department during 1958

Age ..	Men								Total Men	Women								1958 Total	1957 Total	1956 Total	1955 Total
	Un- der 20	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 and over		Un- der 20	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 and over					Total Women
Sec. 16 L.A. 1890 (Certi- fied)	1	4	1	2	1	5	1	—	15	—	—	—	—	1	1	2	2	6	48	68	68
Sec. 1 M.T.A. 1930 (Voluntary)	3	5	7	7	7	7	3	—	39	—	4	1	8	13	12	6	—	44	36	20	19
Sec. 20 L.A. 1890 (Three- day Order)	—	13	15	13	11	11	8	3	74	2	19	14	16	22	16	20	9	118	165	135	124
Sec. 21 (1) L.A. 1890 ..	—	—	—	—	—	—	1	2	3	—	—	—	—	—	—	—	—	—	3	3	4
After investigation	Community Care ..	2	6	15	10	17	5	—	60	2	6	10	8	5	7	9	4	51	68	41	65
	Referred to Welfare Department ..	—	—	—	—	—	—	1	2	—	—	—	—	—	1	4	4	9	12	11	5
	Referred (back) to General Practitioner	—	—	2	1	—	—	—	4	—	—	—	2	2	1	—	—	5	9	9	7
	No further Action ..	2	2	4	8	3	4	3	26	—	3	2	9	3	4	4	5	30	54	38	17
TOTAL 1958 ..	8	30	44	41	39	32	23	6	223	4	32	27	43	46	42	45	24	263	395	327	305
1957 ..	14	29	35	34	20	22	12	5	171	6	28	39	36	47	40	13	15	224	—	—	—
1956 ..	8	20	33	19	18	6	14	2	120	6	17	28	26	34	41	41	14	207	—	—	—
1955 ..	3	16	32	28	11	18	16	3	127	3	11	26	36	27	41	22	12	178	—	—	—

These figures include reference to 11 patients who were already in the Towers Hospital.
Nine of these were certified from voluntary status and two were subject to Section 21(1) action.

Of the 287 patients admitted to hospital by this Department's officers, 267 were admitted to the Towers Hospital, Leicester, 19 to Carlton Hayes Hospital, Narborough, and one to Mapperley Hospital, Nottingham.

Thirty-six patients were admitted to the Towers Hospital by County Duly Authorised Officers. Such patients were resident in the catchment area of the Towers. Once such patients are admitted, the responsibility for any further action under the Lunacy Act falls on the City officers, and I therefore give the following statistics relating to such admissions.

The 36 patients were admitted via Section 20 and the eventual results were as follow :

19 became voluntary patients within 3 days
10 „ „ „ after a further 14 days
3 died
3 were discharged
1 became a temporary patient

During the year officers of this Department undertook to obtain and provide the Towers Hospital with social histories of patients admitted, to follow up those admissions in order to maintain contact with the patient and to provide after-care in those cases where it was recommended.

In this work the hospital social workers act similarly with regard to patients admitted other than through this Mental Health Department.

Co-ordination has been improved and co-operation is good so far as the present arrangements will allow, but it is felt that integration of this Department with the hospital social workers would enormously improve the service.

Discharged patients too frequently deteriorate to the point where readmission is necessary and this I feel is because the resources available to the officers providing after-care are inadequate. Social clubs, sheltered workshops and hostels are needed.

The ascertainment of need for such establishments can only be assessed if an integrated service is in being and access to specialist advice within the service would further aid to that end.

Mental Deficiency

Analysis of cases dealt with during the year :

		<i>Cases on Jan. 1st,</i>			<i>Cases on Dec. 31st,</i>
		1958	<i>Additions</i>	<i>Removals</i>	1958
Statutory Supervision ..		460	22	23	459
Voluntary Supervision ..		105	18	3	120
After-care, Friendly and other Supervision cases		93	20	5	108
Licence		5	3	7	1
Guardianship		2	1	3	—
Community care pending ascertainment ..		12	—	8	4
		—	—	—	—
Total (1958)		677	64	49	692
		—	—	—	—
(1957)		677	71	71	677
(1956)		643	79	45	677
(1955)		589	68	19	638
(1954)		575	61	47	589
(1953)		562	86	73	575
(1952)		537	47	22	562
(1951)		491	77	31	537

Of the cases referred during the year, 35 were from the Local Education Authority. Twelve of these concerned ineducable children and 23 were referred because they possibly needed supervision after leaving school.

Patients Admitted to Hospital

Temporary Mental Deficiency Hospital Care (Circular 5/52)

Since the opportunity was originally created in 1952 to enable supervision cases to be admitted for short-term care in a Mental Deficiency Hospital the requests for such care have been made to the Glenfrith Hospital.

During 1958 we were granted facilities by the Physician Superintendent to enable such care to be given in 40 instances. This care was sought in some cases because of an emergency in the family situation; a mother to hospital is not an infrequent cause of such an emergency. Many admissions enable the parents of a difficult defective to have a holiday free from the care of their problem child. In the latter type of admission application usually needs to be restricted to a period of two weeks because of the shortage of available accommodation. In cases of emergency such hospital care can be given for a period not exceeding eight weeks.

Particular consideration is given to those cases long on the waiting list for more permanent care.

During 1952 Temporary Care was given in 4 instances

„	1953	„	„	„	10	„
„	1954	„	„	„	15	„
„	1955	„	„	„	15	„
„	1956	„	„	„	19	„
„	1957	„	„	„	32	„
„	1958	„	„	„	40	„

Accommodation usually becomes available when the hospital's own patients are temporarily absent.

Long Stay or more Permanent Hospital Care

Based on the recommendations of the Royal Commission's Report on Mental Illness and Mental Deficiency, the Minister of Health recommended a complete revision of all patients in Mental Deficiency Hospitals, and Circular 2/58 outlined the method whereby new admissions may enter a Mental Deficiency Hospital informally instead of under certificate.

As a direct result of this recommendation, 281 of the 484 Leicester City patients in the Glenfrith Hospital had their orders discharged and they were readmitted informally.

The total number of new admissions made to Mental Deficiency Hospitals during 1958 was 15. Seven of those were admitted informally. Of the 15 Leicester City patients admitted to the Glenfrith Hospital, four were the result of action in the Magistrates' Courts and 11 were from those names which were on this Department's waiting list for admission.

Waiting List for Long Stay Care

When the year commenced there were 25 names on the waiting list.

There were 11 names removed from this list when vacancies were given and two were removed when alternative arrangements were made or home conditions improved. Twenty-one new names were added during the year and 33 vacancies were needed concerning those in the community on December 31st.

In addition to those previously referred to in the community there are 10 adult female patients in the Towers Mental Hospital who also await Mental Deficiency Hospital vacancies.

Names are only added to this waiting list when there is some real emergency of need. A name is not included where the care and control at home is considered reasonable or where opposition is likely to arise if hospital care were proposed.

TRAINING

Emily Fortey School

The Emily Fortey School, our name for what most authorities regard as their occupation centre, is a very advanced training ground for mentally handicapped children. The school was first opened in September, 1956, and in its first two complete years of being, made great forward strides in the training of such children. The school was designed for 120 places and during the year the register varied between 120 and 128. Attendances have been high ; one month's average being 113 pupils per day, almost 95% of the maximum possible at that time.

The progress made by the younger children and appreciative communications from their parents continually reward the staff. The pupils in the intermediate classes now have training on a higher level than ever before. The older girls' ability to respond to simple dressmaking and domestic training has surprised many, and some have done particularly well with cookery, receiving such training from the Cook. The older boys are showing skill with woodwork with results equal to professional standards.

There is a very good relationship between pupils and staff and a happy atmosphere is one of the first things remarked upon by visitors to the school.

During the months immediately following the opening of the school in September, 1956, the majority of visitors were local or near local groups. Since that time there has been a change and most visitors are now professionally interested groups from all parts of the country, some even coming from abroad.

The Leicester Branch of the National Society for Mentally Handicapped Children contributed towards a holiday outing for the pupils, enabling them to visit Wicksteed Park, near Kettering, on 30th June.

American officers' wives from Bruntingthorpe Air Base have interested themselves in the school and have provided gifts and a great deal of kindness towards the pupils.

The Annual Sports and Open Day was held on 22nd July and was extremely successful. £20 worth of goods, articles made by the pupils, were sold to visitors on that day.

The Deputy Medical Officer of Health is the School's Medical Officer. Periodic examinations of the pupils are regularly carried out. Vaccination against poliomyelitis was given to practically the whole of the pupils.

S. A. GOODACRE.

EMILY FORTEY SCHOOL DENTAL SERVICE REPORT

In keeping with the pattern set last year all the pupils in the school were inspected and all cases with doubtful gum conditions were swabbed ; 113 pupils were inspected, 35 were defective but were not referred for treatment, 51 were referred for treatment. Four swabs were taken, three being Vincent's positive. These three pupils were excluded from the school and referred to their own family doctors for penicillin therapy and were not re-admitted until a satisfactory negative swab had been taken.

Other treatment was again restricted to extractions. These were carried out, as before, at Richmond House clinic. Three sessions were devoted to these cases ; altogether 50 permanent and 27 temporary teeth were extracted for 41 pupils.

I would like to thank Mrs. Taylor and her staff for their help and co-operation both at the inspections and during the treatment.

Dental Inspection and Treatment

Year	No Treat- ment Required	Defective Not Referred	Defective Referred for Treatment	In- spected	Anae- sthetics Given	Perma- nent Teeth Extracted	Tem- porary Teeth Extracted
1958	27	35	51	113	41	50	27
1957	33	21	66	120	49	151	67

P. S. R. CONRON, L.D.S. R.C.S.(Eng.)

Further Training Plans

Had many of those children now attending the Emily Fortey School only been provided with the old type of occupation centre there would undoubtedly have been a much longer waiting list for residential hospital care than there is at the moment.

The situation is, however, developing towards the urgent need of separate accommodation for the older pupils at the school. We are very full in all the seven classrooms and there is no prospect of being able to move pupils out from the top classes to allow for admissions in the

nursery. We have no waiting list at the moment for admission, other than those suitable for a crèche, but vacancies may be wanted before long, and the placement of the older pupils in industry or other useful occupation cannot be visualised. At least one adult occupation centre or sheltered workshop is needed. The following statistics indicate the need.

Of the 692 Mental Deficiency supervision cases in the community :

				Under 16		Over 16		Total
				M.	F.	M.	F.	
Number now attending Emily Fortey School				40	38	22	28	128
With additional premises suitable placement could be as under :								
Emily Fortey School				49	41	13	22	125
Sheltered workshop (near employability)				—	—	17	7	24
Adult Occupation Centre (not employable)				—	—	19	17	36
Totals				49	41	49	46	185

Forty-five of those included as suitable for either Sheltered Workshop or Adult Occupation Centre are community care cases who cannot be found employment and who cannot attend the Emily Fortey School. This number has increased during the year and it is likely to increase further. One of the contributory factors has been the trade recession in the Spring of 1958. This was thought to be a temporary state at the time but as the difficulty of placement in employment persisted throughout the year a permanent need is perhaps to be considered. Another factor is the simpler method of discharge of patients from Mental Deficiency hospitals. If the indicated trend towards the provision of Hostels develops, the numbers to be catered for in new training establishments will increase still further.

There is a similarity of need for the mentally ill and the mentally defective persons in the community. Mental Health social workers from the hospitals and the local authorities are working in the community and finding the same problems. There is the need for Social Clubs, for Sheltered Workshops and for Hostels. I am quite sure there are patients in the Mental Hospital and the Mental Deficiency Hospital who could be discharged from hospital if those facilities were available.

This alone points to the need for an integrated service in order to co-ordinate the whole of the work in the Mental Health field, if only to discover the size and nature of the problem in reasonably accurate terms. Psychiatric advice on the planning of the service should be sought and I further believe that psychiatric consultant service should be more readily available to the staff of the Mental Health Department.

S. A. GOODACRE.

HOME NURSING SERVICE

Senior Superintendent's Report for the Year 1958

(Miss A. RATCLIFFE, S.R.N., S.C.M., Q.N.S.)

During the fifth year of the Authority's direct administration of the service, alterations to the premises and important changes in the use of the residential accommodation at the West End and Central Homes were completed, resulting in more economic use of the accommodation, improved co-ordination of the public health services, co-operation of personnel and satisfactory accommodation for staff employed at the centres.

West End Home, 62-68 Valence Road

On the 1st March, 1958, the alterations were completed and the centre was opened in the presence of the Lord Mayor and Lady Mayor-ess, Alderman F. J. Jackson, J.P. and Councillor Mrs. C. E. Jackson.

Occupying part of the building, the Home Nursing Service continues to function from this centre, the staff serving the west end of the city, Aylestone and the Eyres Monsell Estate. Also, two furnished flats are rented and occupied by the Home Nursing Superintendent and her deputy. In addition there is office accommodation for four health visitors and three public health inspectors who work in the Braunstone area, clinics for maternity and child welfare, minor ailments and speech therapy and a common room/kitchen for staff working from the centre.

Central Home, 96 New Walk

Alterations to this home were completed at the beginning of October, 1958, the service continuing to serve the centre and part of the south and east of the city. Rented accommodation is provided in the nature of one furnished flat and five furnished flatlets for the Home Nursing Superintendent and District Nursing Sisters or students. In addition to the service there is accommodation for maternity and child welfare clinics, welfare food distribution centre, and common room/kitchen for staff working from the centre.

The accommodation for the service is proving satisfactory, the provision of furnished flats and flatlets for staff an advantage, and the opportunity for closer co-operation with colleagues in other branches of the Public Health Service is appreciated.

Nursing Work Statistics

The system of record keeping which was commenced in 1956 continues to give valuable information as will be seen in the following report on the nursing work :

Year	Total cases	Total Visits
1948	4,684	113,903
1949	5,310	127,207
1950	6,209	131,083
1951	6,973	133,690
1952	7,981	136,586
1953	8,381	157,198
1954	9,339	167,665
1955	9,382	166,983
1956	9,157	165,887
1957	8,726	168,399
1958	7,865	165,134

Summary of work in each area

		No. of Cases		No. of Visits	
		1957	1958	1957	1958
Central Home	..	3,424	3,082	65,559	60,138
West End Home	..	2,765	2,504	56,325	59,744
Belgrave Home	..	2,537	2,279	46,515	45,252
Totals	..	8,726	7,865	168,399	165,134
Males nursed	..	3,600	3,453		
Females nursed	..	5,126	4,412		

Classification of Cases and Visits

			1957	1958	1957	1958
			Cases	Cases	Visits	Visits
Medical	..	..	6,582	6,013	134,749	132,622
Surgical	..	..	1,725	1,611	25,105	27,209
Tuberculosis	..	..	130	82	6,026	3,893
Notifiable diseases	..		91	41	975	307
Maternal complications	..		159	116	1,389	1,099
Others	..	..	39	2	155	4

Source of Cases

			No. of cases	%
General practitioners .. ..	..	..	5,859	74.50
Leicester Royal Infirmary .. ..	..	..	1,377	17.51
Leicester General Hospital .. ..	..	..	275	3.50
Hillcrest Hospital .. ..	..	..	10	.13
Other Hospitals .. ..	..	..	94	1.20
Chest Clinic .. ..	..	..	30	.38
School Medical Services .. ..	..	..	1	—
Health Department .. ..	..	..	53	.67
Welfare Department .. ..	..	..	23	.29
Direct application .. ..	..	..	143	1.82

Average monthly case and visit load per nurse

		Case load		Visit load	
		1957	1958	1957	1958
Central Home .. ..	..	16	17	321	334
West End Home .. ..	..	16	16	333	331
Belgrave Home .. ..	..	16	15	298	268

Result of Treatment in Age Groups

			0-4	5-14	15-64	65 and over	Total
Recovered .. ..	..	..	424	303	2,347	1,373	4,447
Hospital .. ..	..	..	21	35	579	498	1,133
Died .. ..	..	..	4	1	174	577	756
Referred to Health Visitor			69	2	98	10	179
Referred to Nursing Home			—	1	2	21	24
Referred to Private Nurse..			—	—	2	10	12
Refused treatment .. ..	..		—	—	9	8	17
Left the district.. ..	..	..	7	3	61	35	106
Other causes .. ..	..	..	2	2	51	50	105
Carried forward to 1959 ..		..	12	9	369	696	1,086
			<u>539</u>	<u>356</u>	<u>3,692</u>	<u>3,278</u>	<u>7,865</u>

Classification of Main Diseases, Cases and Visits

				% of total cases	% of total visits	Average No. of visits per case
	Cases	Visits				
Tuberculosis	82	3,893		1.04	2.36	47
Cancer	392	13,394		4.98	8.11	34
Other tumours	108	1,723		1.37	1.04	16
Diabetes	163	15,933		2.07	9.65	97
Anaemia	387	9,151		4.92	5.54	23
Heart and circulatory ..	1,303	37,261		16.57	22.56	28
Respiratory	1,156	15,002		14.70	9.09	13
Digestive	982	6,026		12.49	3.65	6
Renal diseases	55	968		.70	.59	17
Generative organs—male and female	648	4,558		8.24	2.76	7
Maternal complications	116	1,009		1.47	.61	8
Boils, abscesses and skin diseases	859	14,057		10.92	8.51	16
Acute rheumatism	6	96		.08	.06	16
Rheumatoid arthritis ..	126	6,176		1.60	3.74	49
Diseases of the nervous system	176	10,048		2.24	6.09	57
Diseases of the eye and ear	267	2,665		3.39	1.61	10
Other specified or ill- defined diseases	541	15,953		6.88	9.66	29
Diseases of the bones ..	122	2,196		1.55	1.33	18
Congenital malformations	11	346		.14	.21	31
Infectious and parasitic cases	32	238		.41	.14	7
Allergic disorders	2	187		.03	.11	93
Accidents :						
Occupational	14	115		.18	.07	8
Road	143	1,407		1.82	.85	9
Home	164	2,538		2.08	1.54	15

General Observations

Medical cases show a slight decrease in cases and visits, due, in part, to the change from injection to oral treatment for patients in the heart, circulatory and respiratory groups. Again the statistics reveal that the highest percentage of medical cases is in the older aged group, many long-term cases requiring general nursing care.

Surgical cases reveal a decrease in the number of cases, with an increase in visits. The average number of visits paid to this type of case was 16 as compared with 13 in 1957, and five in 1956. This increase is mainly due to long-term treatment to patients who are having radio-therapy treatment at the hospital out-patients' department, and patients in the older age group suffering from varicose ulcer of leg.

Tuberculosis. During the past two years there has been a substantial decrease in the number of cases and visits, e.g. two-thirds in the number of cases with a consequent reduction in the number of total visits. This is due to several factors, including the availability of tuberculosis hospital beds, early diagnosis and treatment of the disease.

	Cases	Visits
1956	247	11,481
1957	130	6,227
1958	82	3,893

Notifiable diseases show a reduction in the number nursed—41 cases, 307 visits in 1958—compared with 91 cases, 975 visits in 1957. The 41 cases nursed in 1958 include 17 cases of influenza, the remaining cases being measles, scarlet fever, whooping cough and other infectious and parasitic cases.

Maternal complications. When the condition of the mother or child is not conducive for the nursing care to be continued by the midwife the cases are transferred to the service by the midwife, general practitioner or hospital. After the fourteenth day, or when the patient has recovered, the case is transferred to the Health Visiting Service for supervisory visits.

Other cases are few, and consist of patients referred for observation or pathological specimens, usually when the disease is not diagnosed.

Source of case. The statistics continue to reveal that the largest percentage (approximately 74% of the total cases) is referred by the general practitioners. This co-operation and direct contact between the services remains a vital link resulting in a good patient/doctor/nurse relationship. The confidence shown in the Service by the general practitioners is gratifying and appreciated by the nursing staff. Approximately 23% of the cases are referred by the local hospitals and Chest Clinic.

Direct application is made for 1.82% of the cases, usually from relatives of patients in the older age group.

Result of treatment. The total number of patients who recovered is 56.54% these being mainly in the lower and middle-age groups. Most of the cases referred to hospital were in the middle and older age groups, a number in the middle age group being referred for diagnostic purposes and surgical treatment, whilst those in the older age group are usually referred to hospital for the reason of unsatisfactory home conditions, living alone, or requiring constant nursing attention.

The majority of the patients who died are in the older age group. Maternal complications, diabetics, and a few patients in the older age group were referred to the health visitors for supervisory visits. Seventeen patients refused treatment—usually injection therapy—therefore, with the doctor’s approval, visits were discontinued. The patients taken off for other causes are those referred to the doctor’s surgery, works surgery, or the treatment has changed from injection therapy to tablets. In these cases it is possible for the relatives to carry out the prescribed treatment.

With reference to classification of diseases it will be seen that the highest percentage of cases (16.57%) is heart and circulatory, and most of these are in the older age group, with an average of 28 visits to each patient. Respiratory cases show a reduction in cases with an increase in the average visit to each patient—10, 1957—13, 1958. Patients suffering from cancer amount to 4.98% of the total cases, with an average of 34 visits to each patient. It is regrettable that accidents in the home, on the road and at work have increased, there being 321 in 1958 as compared with 227 in 1957.

Nursing of the Aged

Additional statistics in respect of those 65 years and over are given below :

				Cases nursed
Male	..	..	..	1,448
Female	..	..	..	1,830
				<hr/>
Total	..	..	..	3,278
				<hr/>
Total visits..	..	..	..	95,068

Assistance available

Family	..	..	86.7%	Municipal Home Help	2.9%
Friends	..	..	4.5%	Other assistance	.. 1.1%
Neighbours	..	..	1.6%	None	.. .. 3.2%

Where nursed

Bed upstairs	..	30.9%
Bed downstairs	..	32.7%
Ambulant or mobile..	..	36.4%

Bathroom

Upstairs	..	.. 41.4%
Downstairs	..	.. 9.0%
None	..	.. 49.6%

Hot water supply

Yes	..	.. 53.8%
No	..	.. 46.2%

Water closet

Internal	..	.. 41.6%
External	..	.. 56.7%
Shared	..	.. 1.7%

Bed sores on first visit .. 232 cases

Mental state

Alert	..	..	..	70.1%
Depressed	..	..	..	11.5%
Confused/unconscious			..	18.4%

The nursing care of the aged constitutes approximately 41.7% of the total cases and 57.6% of the total visits. The majority of these are long term requiring constant attention. It is pleasing to report that 92.8% receive assistance from relatives, friends and neighbours, the home helps giving valuable assistance, particularly to patients living alone. Assistance from these sources in many instances enables the district nurse to give adequate nursing care to patients who would otherwise require hospital treatment.

It is apparent from the statistics headed "Hot water supply", "Bathroom" and "Water closet", that many of the elderly sick live in the older type of dwelling. From the column headed "Mental condition" it will be seen that 70.1% of the patients were mentally alert and co-operative, 11.5% depressed and 18.4% confused or unconscious when referred for treatment. Most of these were extremely ill, some incontinent or unconscious.

Of the total number of aged people nursed, 420 had urinal incontinence and 288 faecal incontinence. This type of patient requires constant attention and this, coupled with the extra linen and laundry required, adds considerably to the work of those looking after them, particularly where laundry facilities are inadequate, as in some of the older type of dwelling, and when the income is small.

I am pleased, at this juncture, to report that on Monday, 15th September, 1958, the Leicester Old Peoples' Welfare Association, with the co-operation and help of the Women's Voluntary Service and the Hillcrest Hospital, instituted a much-needed laundry service, priority being given to the aforesaid type of case. On the first round an initial supply of draw and long sheets was delivered to 13 incontinent patients, soiled laundry being collected and replaced by clean linen a few days later, continuing a twice weekly collection and delivery service. A small charge is made for each bag of clean linen, which is repaid by the National Assistance Board to needy patients.

Owing to the shortage of transport, at the present time only a limited number of necessitous cases can be accepted. Nevertheless, it is anticipated that when an additional van is purchased by the Leicester Old People's Welfare Association in 1959 the Service will be extended to cover a larger part of the city.

At the year end an average of 14 cases per week received help. This service is extremely valuable to the patients, relatives and nurses, and we are most grateful to the Leicester Old People's Welfare Association, the Women's Voluntary Service and the Hillcrest Hospital for organising and giving such a valuable service to the community.

Nursing of Children

Statistics in relation to children are given below :

		Under 1 year		1-4 years		5-14 years		Total	
		Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits
Male	..	162	1,438	217	1,701	211	1,344	590	4,483
Female	..	69	715	91	473	145	1,115	305	2,303
		—	—	—	—	—	—	—	—
Total	..	231	2,153	308	2,174	356	2,459	895	6,786
		—	—	—	—	—	—	—	—
					1957	1958			
Children nursed					1,018	895			
Visits paid					6,691	6,786			

The statistics reveal a decrease in cases, possibly due to several factors, including pre-natal and post-natal health teaching of the mother, immunisation of the children, improved housing and schools.

A few years ago many children suffering from measles and pneumonia following measles required trained nursing attention at home. These cases are now considerably reduced, so much so, that only one patient was referred in 1958. It is also observed that the number of children suffering from respiratory illnesses has decreased. Two children, one under five years and one over five years, were diagnosed as cancer and were nursed at home over a fairly long period. Unfortunately both children died.

Many children in the 5-14 age group receive injection treatment for tonsilitis, otitis media, septic wounds, osteomyelitis, abscesses, and infected glands. The Leicester Royal Infirmary referred quite a few post-operative circumcision cases. Unfortunately the number of home and road accidents in children referred to the service has increased.

The nurses report that parents usually co-operate well when children's nursing is required, appreciating the opportunity to learn more about home nursing and care of their children.

Nursing Appliances

Each centre has a liberal supply of nursing appliances which are loaned to patients free of charge, a total of 1,431 having been loaned

during the year. In addition, 29 rubber foamed mattresses, 14 air beds and 20 hospital type beds were loaned to necessitous cases on the recommendation of the nurses.

The rubber foamed mattress gives infinitely more comfort to the patients than the air beds; therefore, eventually these will replace the air beds.

There have been more requests for the hospital type of bed with pulley for patients handicapped with spinal injuries and amputation of lower limbs. This type of bed and pulley, with a rubber foamed mattress is of immense value when nursing patients with limited movement. Also, the pulley encourages the patient to move his position frequently, helping to avoid the formation of bed sores.

The local branch of the British Red Cross Society loans nursing appliances to patients not receiving attention from the district nurses.

The Leicester Aid-in-Sickness Fund, and the Charity Organisation Society continue to give valuable help in the nature of nourishment, clothing, bedding, mattresses, beds and monetary aid to necessitous cases. This help is deeply appreciated by the recipients.

Staff

The staff remains at the equivalent of 51 full-time nurses. During the year Miss G. Warner, Assistant Superintendent (Central), and twelve members of the staff left the service. No real difficulty was experienced in filling the nursing sister vacancies, but owing to a serious shortage of administrators there is delay in filling the vacancy of Assistant Superintendent, but it is anticipated that an appointment will be made in the New Year.

Training of District Nurses

Training continues at the Central Centre, 96 New Walk. Recruitment of district nursing students remains poor. Therefore, during the year it was only possible to arrange one training course instead of the usual two. Five students successfully completed training, four for our own staff and one for Nottinghamshire County Nursing Federation. With the co-operation of the Health Visitor Tutor many of the lectures have been combined with the Health Visitor Training Course.

I take this opportunity to express appreciation and thanks to the lecturers, including the Medical Officer of Health and his staff, the local hospitals, Welfare Department, Education Department, County

Nursing Association, and St. Margaret's Works for their continued interest and co-operation.

Refresher Courses for District Nurses

The staff is encouraged to attend a refresher course every five years. This year four nursing sisters attended the course at Newnham College, Cambridge, arranged by the Queen's Institute of District Nursing.

Co-operation within the Public Health Services

Since the conversion of the West End and Central Homes into combined service centres, co-operation has been simplified, resulting in a greater understanding of the responsibilities of colleagues in other branches of the service. In the Belgrave area, where the centre is for district nurses only, co-operation remains most satisfactory. At all centres the staff use every opportunity to further the co-ordination of the services and co-operation from colleagues has been freely given, the result being apparent from the following reports on two of our cases.

1. A paralytic long-term widowed female patient, living in her own house attended twice daily by the district nurse was looked after by an elderly female lodger who died suddenly, leaving the patient alone in the house. The neighbours were helpful, but could not accept the full responsibility for caring for the patient and looking after the home. The Home Help Service was advised of the circumstances and help became available until a young couple came to live with the patient. The valuable assistance received from the combined efforts of our two services enabled the patient to remain in her own surroundings.

2. The domiciliary midwife transferred a young mother and premature infant to the service for nursing care. The mother was looked after for the necessary period and the infant until he weighed 5 lb. 12 oz., when it was obvious that progress was established. The district nurse notified the health visitor that nursing visits would be discontinued. All particulars of the case were given, and the health visitor continued visiting. The mother was most grateful for the continuation of visits and for professional advice.

Co-operation of the kind quoted in the above instances is of immense value to the district nurse, and is very much appreciated.

Co-operation with Hospitals

Seventy-two nursing students from Leicester Royal Infirmary visited with the District Nursing Sisters. Prior to the visits a talk on the Service

was given, and following the visits, discussion groups were held attended by members of the service and hospital students. In addition, a Home Nursing Administrator gave a talk to a group of trained nurses at the Leicester Royal Infirmary on "Co-operation between the hospitals and the Home Nursing Service". A lecture was also given by the Senior Superintendent to nursing students at the Leicester General Hospital. Co-operation with other hospitals in the area remains good.

During the District Nursing training course the students visited the Chest Clinic, Radiotherapy Department of the Leicester Royal Infirmary, Hillcrest and Towers Hospitals, where they heard about the work of these special departments and hospitals in relation to district nursing. The contacts made and the knowledge gained is resulting in a better understanding between the services.

Transport

It is agreed that adequate and safe transport is essential for the continuation of a satisfactory nursing service. During the last few years various types of two-wheeled motor transport have been tried. All have advantages such as being economical and sufficiently fast, the disadvantages being lack of protection, exposure to accidents, and some are too heavy. These disadvantages often cause serious delay in the service, therefore it is concluded that none of the tried vehicles would give satisfactory service over a long period.

In view of the report submitted and the concern felt over the ten accidents to nurses riding two-wheeled vehicles, the Committee agreed that more protective transport should be provided and that a gradual change should be made from two-wheeled vehicles to cars, commencing with one new Ford Popular in 1958, and five more in each of the next two financial years.

With this increase in the number of cars, more nurses will have improved protection and safety, nursing duties will be carried out under less strain, longer distances can be covered, particularly for late evening and emergency calls, uniform and nursing bags will wear longer, more time will be available for nursing as time will not be spent on pulling on and taking off protective weatherproof clothing, and small articles of nursing equipment can be transported to patients with a saving of extra transport and reducing the fear of loss.

Since the introduction of the Council's car purchasing scheme an increasing number of nurses are taking advantage of the scheme by providing their own cars and receiving a casual user's car allowance.

This, with the provision of more Local Authority cars should bring about a considerable improvement in the transport.

Four transport meetings have been held and attended by the Deputy Medical Officer of Health, Chief Ambulance Officer and six nurse representatives. These meetings proved helpful and constructive.

Conclusion

In reviewing the year's work, progress has been made particularly in co-ordination of the Public Health Service and transport. The demands on the service have been met, resulting in an interesting and satisfying year of work.

CARE AND AFTER-CARE, INCLUDING HEALTH EDUCATION

Sherwood Village Settlement

The two Leicester settlers mentioned in my reports since 1954 (J.T.H. and C.A.T.) remained at Sherwood Village during 1958.

Assistance to cases of Tuberculosis

The scheme for the provision of beds and bedding to necessitous cases of tuberculosis was continued and 40 such cases were helped during the year ; of these nine were new cases.

Free milk was supplied to 174 cases, of which 64 were new cases.

Convalescence

During the year recuperative holidays were arranged for 172 convalescent patients who were not in benefit with the Leicester and County Convalescent Homes Society or a similar body, compared with 136 last year.

Of these patients, 63 were elderly people receiving the Retirement Pension, and 10 were tuberculous patients who were sent to Spero Holiday Homes under the scheme organised by The Chest and Heart Association.

Eight mothers, accompanied by their babies or toddlers, were sent to a Mother and Baby Home, where, in addition to the benefits gained from a fortnight's recuperative holiday, they also received training in mothercraft.

Patients were assessed on financial circumstances and in 94 cases the total cost was borne by the Corporation, the remainder being required to pay varying amounts according to scale.

The following table gives further details of the number of patients for whom recuperative holidays have been arranged during 1958 :

No. of applications	Sent to					Not sent to Convalescent Home
	Charn-wood Forest	Roe-cliffe Manor	Hun-stanton	Shering-ham House	Other Homes	
219 (186)	19 (28)	18 (2)	77 (61)	36 (14)	22 (31) (+ 14 babies or toddlers accompanying their mothers)	47 as follows : Refused to pay assessment .. 12 (17) Dealt with by Convalescent Homes Society 5 (3) Other reasons : Private arrangements, illness, etc. 30 (30)

(Note : 1957 figures in brackets)

HEALTH EDUCATION

(Mr. E. W. HARRIS, Health Education Assistant)

I have pleasure in submitting my sixth Annual Report covering my work for the year ended 31st December, 1958.

Once again I am able to state that the number of applications for talks and films on health subjects has been most satisfactory. Many of the applications came from organisations not previously visited. One of the new ventures, that of attending meetings of expectant mothers and fathers at Bond Street, Westcotes and General Hospitals has been particularly satisfying. Attendance at these meetings to show films gives me the opportunity to impart information on the facilities available to the parents and children through the Department. At these meetings the audience is most receptive of any knowledge which will be of help in the care of the young baby.

The report also contains detailed reports of two major exhibitions.

Film and Lecture Service

During the year I attended 194 meetings with a total audience of 11,889, classified as follows :

			Number of meetings	Number present
Schools (Dental Hygiene)	..	..	23	6,592
Expectant parents	..	..	18	489
In-service training courses	..	..	18	315
Youth Clubs	..	..	16	553
Nursery nurses	..	..	14	384

Meetings, etc.—continued

				Number of meetings	Number present
Scouts, Cubs and Boys' Clubs	..	..	..	12	552
Young Wives	..	..	..	10	248
Student nurses	..	..	..	10	239
Political Groups	..	..	..	9	173
Day Release Students (Technical College)	..	..	..	8	245
Welfare Clinics	..	..	..	8	115
Townswomen's Guilds	..	..	..	7	214
Church Groups	..	..	..	7	137
Parent/Teacher Associations	..	..	..	6	761
Schools	..	..	..	6	251
Red Cross and St. John	..	..	..	5	112
Adult Schools	..	..	..	4	78
Co-operative Guilds	..	..	..	4	86
Evergreen Clubs	..	..	..	4	132
British Legion	..	..	..	3	145
Student teachers	..	..	..	2	68
				194	11,889

The visits to the schools with the dental hygiene film "Let's keep our Teeth" were to support talks given by Miss Chamberlain (Dental Hygienist) and myself and usually followed the periodical examination by the School Dental Officer. Reports from Head Teachers indicate that these talks and the showing of the film have a considerable impact on the children. Unfortunately this is rather short-lived, but by providing posters and display sets which can be displayed at intervals after the talk it is hoped that the conversion period might be extended.

Other subjects covered at these meetings were "The Work of the Health Department", "Your Children's Health", "Value of Immunisation", "Clean Air", "Food Hygiene", Care of the eyes, ears, teeth, feet, etc., and "Prevention of Home Accidents".

The City Health Department film continues to give good service and as a matter of interest, during the last six years the film has been shown approximately 310 times.

Many talks have been given during the year by other sections of the Department, and whenever possible these talks were supported by some kind of visual aid, e.g. films, filmstrips, film slides, flannelgraphs, sound filmstrips, etc.

A set of slides was made during the year on "The Work of the Home Help Service" to replace the filmstrip which is now out of date ; this is proving most useful to support talks given by members of the Home Help Service.

Other filmstrips have been purchased on "Care of the Teeth", "Care of the Feet", "Prevention of Tuberculosis", "Diphtheria Immunisation", etc., for use by members of the Department. These filmstrips are also available for loan to schools, factories and other organisations.

Talks have been given to the members of the Home Help Service on "The Work of the Department", "Prevention of Accidents in the Home" and "Household Repairs", and talks and demonstrations were given to student health visitors on "The Use of Visual Aids in Health Education".

Films were shown to the district nurses to support a talk and demonstration on "Lifting Patients".

Publicity

Four thousand copies of the new edition of the Health Services Handbook were received from the publishers in June. An excellent reproduction of a photograph of the Health Department premises in Grey Friars was shown on the front cover and it has been generally agreed that it is a most attractive booklet.

Copies were forwarded to hospitals, general practitioners, dentists, schools, libraries, etc., and a supply was delivered to the Executive Council Offices, Information Bureau and all Health Department premises for general distribution. Copies are distributed at meetings attended, particularly when the subject is "The Work of the Health Department".

The bus cards continue to be one of the best means of publicity and subjects covered during the year included "Poliomyelitis Vaccination", "When to Call your Doctor", "Anti-Litter", "Prevention of Home Accidents", "Diphtheria Immunisation", etc. After display in the buses some of the cards are returned to this office and the cleanest are used for re-issue to factories, schools, etc.

Visits have been made to factories and schools to show posters, bus cards, leaflets, wall cards, etc., which are available for display purposes, and supplies of these have been issued for use in the clinics.

Accident Prevention in the Home

Talks on Home Safety supported by films and filmstrips have been given to Young Wives' Groups, Evergreen Clubs and Parents' Groups and to fourth year pupils in two of the Secondary Modern Schools.

This subject is always included in the Home Help Preparation Course, for student nursery nurses and student health visitors.

Health Centres

The opening of the Health Centres at Valence Road and New Walk allows the opportunity of making full use of displays of health education materials ; this is never possible in the “borrowed” clinics.

Each of these has a fairly spacious display board for posters, display sets, etc., and tables are used for various health education exhibits. At the New Walk Centre a cupboard with a glass door has been utilised as an excellent means of showing displays on various health topics. The subject is changed at frequent intervals by the student health visitors as part of their training.

Staff Meetings

Further meetings of the staff of the Department were held during the year at the Lord Mayor’s Rooms, Hastings Street :

22nd April. Subject : “The Work of the Probation Service”

Speaker : Mr. K. M. Fogg, Probation Officer

15th July. Subject : “Child Care and Co-ordination”

Speakers : Mrs. Sharman, Health Visitor

Inspector J. W. Holmes, N.S.P.C.C.

Dr. A. I. Ross, Deputy Medical Officer of Health

Miss Rickward, Deputy Children’s Officer

Miss D. M. Amelot, Assistant Home Help Organiser

7th October. Subject : “The Day Nursery”

Speakers : Dr. T. A. I. Rees, Senior Medical Officer for Maternity and Child Welfare

Mrs. M. Lewis, Day Nursery Supervisor

At the last of these meetings slides were projected to show the daily activities of the children and the slides were accompanied by a recording of the children at play, saying grace, reciting, etc.

All the meetings were very well attended and members of the staff were obviously very appreciative of these talks.

Health Education Advisory Committees

The Senior and Junior Committees have met at intervals during the year and several useful proposals have been acted upon.

The possibility of the Corporation providing free washing facilities in the public toilets was a point raised at one of these meetings. It was felt that as we are continually informing the public of the necessity for washing hands after visiting the toilet, it would be an incentive to them if these facilities were provided.

Dr. Macdonald took this matter to a meeting of the Public Cleansing and Baths Committee and they ultimately agreed, as an experiment, to provide free washing facilities in two of the outlying conveniences. Unfortunately almost immediately after these facilities were installed they were considerably damaged by irresponsible members of the public, and consequently no further action can be taken along these lines.

A point was made at one of the Junior meetings that although the quarterly meetings of the staff had served a very useful purpose, it was felt that the staff were still not getting to know each other as well as they might. After considerable discussion as to how this could best be organised, it was decided to hold a Social and Dance to which a member could invite one guest. This was subsequently held on the 30th December at the Corn Exchange and was attended by 345 members and friends. Alderman Jackson and Dr. Macdonald spoke briefly during the interval and everyone agreed that it was a most successful evening and should be made an annual affair.

Central Council for Health Education Course

At the beginning of the year the Medical Director of the Central Council for Health Education offered the services of the members of his staff to hold a two-day Course on "Human Relations". The offer was accepted, but a request was made that the Course be condensed to one day and repeated on the second day to enable most of the staff to attend. The Course was subsequently held at the Vaughan College on April 15th and 16th and the general opinion of those attending was that it had been most helpful and interesting.

Exhibitions

Abbey Park Show

The subject of the Department's section of the Leicester Show was "Care of the Feet", under the title "Foot Happy?"

An endeavour was made to show the whole of the problem of foot troubles, the causes, and, particularly to parents, the means of taking care of their children's feet and so avoiding bad feet later in life.

The exhibits were sectionalised as follows :

- (a) Photographs, X-rays and cases of various types of foot disorders.
- (b) Methods of taking care of the feet.
- (c) Correct and incorrect types of footwear and the constitution of good footwear.
- (d) Examples of the benefit of using the correct footwear for the occasion—sport, work, play, etc.
- (e) Museum collection of old type footwear.

Members of the Junior Health Education Advisory Committee, health visitors, and members of the Leicester Branch of the Society of Chiropodists were in attendance to answer questions.

A continuous programme of films on the subject was shown throughout the two days. The number of people visiting the exhibition and seeing the films was extremely satisfactory.

I am very grateful to Mrs. Buxton of the Central Council for Health Education, the Shoe and Allied Trades Research Association, Members of the Society of Chiropodists, and the Leicester College of Technology for the loan of materials which helped to make this exhibition so interesting.

Clean Air Exhibition

This exhibition was held at the Leicester Museum from the 22nd November to the 6th December, and was a larger edition of the one put on at the Abbey Park Show in 1957. The main endeavour was to show how the Clean Air Act was going to affect the people in the city. The various sections were classified as follows :

- (a) The problem as it affects the city at the moment.
- (b) Extract of the Clean Air Act.
- (c) Effect on the householder and industry.
- (d) Map of the city showing possible change-over dates.
- (e) N.I.F.E.S. (Assistance to industry).
- (f) W. C. Holmes Ltd. (Dust and Grit Extraction).
- (g) The part electricity will play.
- (h) Shell-Mex and B.P. Stand showing oil-burning appliances.
- (i) Gas Board Stand showing industrial and domestic gas units.
- (j) Solid Fuels Stand showing smokeless fuels obtainable.
- (k) Department of Industrial and Scientific Research Stand (Incorporating the City Analyst's Department).

The mobile exhibition vans of the Solid Smokeless Fuels Association and Gas Board spent short periods on various sites in the city. Films were shown at frequent intervals in the Museum Cinema.

All schools and women's organisations were informed that if they would like to send parties along, guides would be provided to explain the various exhibits.

The 25th November was reserved for industrialists, and all the industrial organisations were invited to send their representatives along on that day.

HOME HELP SERVICE

by Miss F. E. POLE, *Organiser*

It gives me pleasure to present my first Annual Report as Home Help Organiser on the work of the Service during 1958. In doing so I wish to thank the members of the General Welfare Sub-Committee, the Medical Officer of Health, and members of the staff of the Health Department who have ever been ready to give me advice, co-operation and encouragement.

Staff

(a) *Organising.* The year has brought five changes in the organising staff : I was appointed Organiser and commenced duty on 1st February, 1958 ; Mrs. I. Chapman was promoted Deputy Organiser and was succeeded by Miss M. L. Doughty in the vacancy thus caused, as Assistant Organiser, on the same date.

Miss D. M. Amelot and Mrs. S. Scattergood, Assistant Organisers, resigned during the year and Miss E. M. Rogers and Miss O. L. Cobley were appointed to fill the vacancies thus caused.

(b) *Home Helps.* The number of home helps on the pay roll at 31st December, 1958, was 207 full-time and ten part-time, compared with 228 full-time and eight part-time at 31st December, 1957.

The Work of the Service during 1958

The following figures show the demands on the Service which were met during 1958 in the different categories of assistance required in the home, covered by Section 29 of the National Health Service Act :

<i>Category</i>				<i>No. of Homes Helped</i>	
1. Maternity	525
2. Child Welfare	255
3. Tuberculous	53
4. Long-term sickness (including aged and infirm) ..					889
5. Short-term sickness	948
6. Night help	15
Total	2,685

Organisation of the Service

Once again the main pre-occupation has been to meet the ever-growing demand on the Service with the present number of home helps. Several times during the year this demand was so great that the Service was stretched to its limit and no help was available to care for urgent emergency cases. It was not possible, for a time, to accept further long-

term cases to be added to the existing very heavy load of such cases. To have done so would have caused more strain on the organising staff and home helps, and a curtailment of help to those householders, mainly old people, who were already having less help than their need required. Indeed, it has often been most difficult to explain to a householder—particularly an old person—that cleaning, although desirable, has to take second place to the provision of fires, meals and personal service.

Towards the end of the year the heavier call on the Service, usual during the winter, coincided with an increase in sickness amongst the home helps. In order to give the maximum quantitative service and to cover those householders whose needs were most urgent, it was inevitable that more work fell on the staff remaining at work, which resulted in still more sickness and a higher toll of resignations.

Whilst steps are being taken to alleviate this difficulty, the only permanent solution lies in the extension of the present establishment of 232 home helps. The Service has now reached saturation point, and crises such as we have recently experienced will continually arise if we cannot increase the number of home helps. We cannot hope to expand and indeed it is difficult to maintain the existing service on a satisfactory basis.

One of the difficulties facing the Assistant Organisers is that they are inevitably desk-bound far more than is advisable or conducive to proper supervision, because of the need to be on the spot to deal with inquiries, both from householders and home helps, and to collaborate with other sections of the Health Department as well as other Departments of the Corporation. This work can only be done from a desk, but it is done at the expense of adequate visiting of householders, and supervising and guiding home helps on the job.

Tribute must be paid to the Organising Staff, whose skill, patience and initiative combined to give the maximum of help to the greatest number of people, and to the hard work and understanding of the home helps, the majority of whom are always willing to do far more than their duty calls for, for the comfort and care of their householders.

There has been no change in the basic organisation of the work of the Service. From each office, i.e. 138 Regent Road, and Kelland College, Kirby Road, one Assistant Organiser receives all applications for help, ascertains the need, and if it be a confinement case or an emergency of relatively short duration, allocates one of her home helps to care for the family. Should it be a long-term case, i.e. that of an old person or someone chronically sick, it is passed to the Assistant

Organiser responsible for the allocation of help to these cases. Some indication of the case load carried by these latter Assistant Organisers is shown by the figures of people in their care for the week ending 28th November, 1958, when 688 people (523 homes) in this category received help in varying degrees from Regent Road, and 663 people (502 homes) from Kirby Road.

In addition to these four main groups, one smaller group of specially selected and trained home helps, under the guidance of the Organiser and an Assistant Organiser, cares for Problem Families, and another small group, supervised by the Deputy Organiser, cares for people with infectious diseases.

Training of Home Helps

Three Preparation Courses of six weeks each were held during the year, under the supervision of the Deputy Organiser in collaboration with the Education Department. The importance of the training course cannot be over-stressed, as it is the basis of the attitude towards their work, and of the enlargement of their practical experience which equips the home helps to tackle any kind of emergency in any kind of home to which they may be sent.

A course of 12 lectures on "Problems of Adolescence and Old Age" was held on Thursday evenings during the winter with Dr. A. K. Graf as the lecturer. This course was organised in collaboration with the Workers' Educational Association, and proved of interest and help to the staff who attended.

A short course of lectures and practical work on "First Aid in the Home" was arranged for her group by one of the Assistant Organisers. It is hoped to repeat this for the other groups during the coming year.

The Greensleeves Club of the Home Help Service, organised study circles for its members, and amongst the speakers attending were Mrs. Councillor Trotter on the Staunton Harold Cheshire Home for Incurables, Mr. F. Bullock on the work of the Public Analyst, Mr. W. A. B. Evans, who talked of the work of the Children's Department, and a speaker from the Aylestone Spastic Day Centre.

Our thanks are due to these speakers and to Miss Wilson, Miss Ash and Mrs. Watt of the Education Department, Dr. Graf, Mr. P. Brodetsky, Tutor Organiser of the Workers' Educational Association, and to Dr. Ross, Dr. Rees, Miss Carter, Miss Ratcliffe, Mrs. Lewis, Mr. Beresford and Mr. Harris of the Health Department for their help with lectures.

Other Activities

Once again, the home helps organised a Christmas party and pantomime outing for children in our care, a New Year party for old people, and a carol singing group at Christmas.

Our thanks are extended to those members of the public who from time to time make us gifts of furniture, bedding and clothing which we are able to distribute to householders in need, as well as to the Charity Organisation Society and the Women's Voluntary Services, who readily help when called upon.

Emergency Service

Apart from the periods during the winter when there was a waiting list, help has been provided, usually within 24 hours, when requested by general practitioners, hospital almoners, health visitors, midwives, home nurses, the various other social agencies and relatives and neighbours.

Types of emergency are manifold, and the home help must be prepared to meet any kind of situation. For instance, one Monday morning the home help called at the home of a very difficult, dirty old lady, who kept her front door bolted and barred against all comers. She had accepted the home help, however, and would usually admit her. This morning the door was still locked and, sensing something was wrong, the home help climbed through the kitchen window and found her dead by the sink. The police and a doctor were contacted at once and it was found that the old lady had died from a heart attack.

Another urgent request for help came from a husband whose wife died suddenly one Sunday morning, leaving him with six children, whose ages ranged from 1 to 11 years. Help was sent in the next day ; the father's work consisted of a newspaper round with hours not easy to cover. For some time help was given every day including Sundays, but alternative satisfactory arrangements have now been made for the care of the children at week-ends. During the week the need for help in the family will continue indefinitely.

A case which illustrates the close co-operation between the Home Help Service and the Home Nursing Service was that of an application for help, received from the Deputy Medical Officer of Health, for an old lady living alone and confined to bed, who had refused to call in a doctor and who was not willing to accept help from any source. However, the home help managed to establish fairly friendly relations with her.

The home was found to be in an appallingly filthy state and full of

dirty dressings. The old lady herself was very seriously ill and extremely dirty. A doctor was immediately contacted for a prescription for dressings and with the skilled attention from the District Nurse the patient was soon made comfortable. Fresh bedding was supplied, the dirty dressings and other rubbish cleared out and the home cleaned through. Until the old lady's death two months later, she was cared for continuously by the Service with the Nursing Service in attendance every day. Her last weeks were made easier by the efforts of the two services working closely together.

Collaboration with other sections of the Health Department, and those Departments of the Corporation concerned with social welfare, as well as with family doctors, is of great value in the emergency service, as indeed in all aspects of our work, and gratitude for ever-ready help is acknowledged.

Old People and Chronic Sickness Group

This group of home helps carries the heaviest volume of the work of the Service, and the need for help for old people and the chronic sick is continually expanding, both in numbers and in the actual amount of help required. The first reference to the Service of an individual case may mean a weekly or twice weekly call for cleaning, shopping, etc., but as the householder becomes more senile, infirm or falls ill, the amount of help needed increases and daily service is necessary in the form of attention to fires, preparation of breakfasts and midday meals, etc., as well as cleaning and shopping.

Many people cared for by the group are completely dependent upon the Service. They live alone, with no available relatives, and would undoubtedly have to be found residential accommodation without our Service. Even when relatives are available and would be prepared to have their elderly relations living with them, the independence of the old person is so strong that he or she will not leave home. They fight shy of residential accommodation, and even in these times the fear of "being sent to the workhouse" is very acute, in spite of changes in outlook and material standards in residential homes for old people. It is true to say, however, that some of those fortunate enough to have been rehoused in the newly-built old people's bungalows, once the upheaval of moving has been surmounted, are much happier in their new surroundings. It would seem that the provision of these bungalows which are easy to run, bright and economical, with no dangers or worries of fires, etc., is an important development in the social care of old people, particularly if they can take some limited part in the activity of the neighbourhood.

The help given to the elderly sick and infirm often calls for service in the evenings and at week-ends outside normal working hours. One old lady, bedridden for eight years, with not a single relative, often difficult and incontinent, has received help from the Service every day for the past five years. Another elderly woman, with an equally elderly sister, who had received help daily for a considerable time, deteriorated quickly and became so ill that she could not be moved to hospital, and help had to be given night and day just before she died.

An urgent call was received one day from a family doctor who had called that morning on three elderly sisters, aged 83, 81 and 79, living together who had nearly gassed themselves. Help was sent immediately, as all three were confined to bed. After they had recovered from the shock, however, they decided that they could manage ; they are all three quite active and the home help only calls occasionally to help with shopping.

The Laundry Service operated jointly by the Home Nursing Service and the W.V.S. and the Old People's Welfare Association, has proved invaluable in helping several of the old people cared for by our Service, and its early expansion is much to be desired.

The practical help given by the Home Help Service to old people and the chronic sick is only part of their work. The knowledge that the home help will call ; that there will be someone to talk to, if only for an hour, breaks up the loneliness of many old people. The only difficulty is that many really need more help than we are able to give ; our limitations are set by the number of home helps available to meet the demand of the increasing number of old people.

It is pleasing to report that a party of sixth form grammar school girls, inspired by one whose mother is a home help, volunteered during the summer holidays to visit some of the old people receiving help from the Service. They ran errands, prepared tea, chatted, and generally brightened up the afternoons of quite a number of old people.

“Problem Family” Group

The growth of the social services since 1948, and full employment since the end of the war, have so raised standards and conditions in working-class homes that the type of family known as a “problem” family has become much more noticeable, and its diagnosis as a social evil which must be eradicated is accepted by all social work agencies.

These families present a familiar pattern of ill-kept, dirty homes, apathetic parents, neglected, verminous and enuretic children ; house-

hold and financial mismanagement produce an accumulation of debts, threatened eviction for non-payment of rent, non-attendance at school by the children and neighbour-ostracism.

Such characteristics are often the symptoms of deep-seated emotional and mental disturbance, physical and mental ill-health and of attitudes towards society caused by the historical environmental background of parents. Many mothers marry in their teens and become disinterested in their homes and children by reason of repeated pregnancies. Fathers are in and out of work ; their records make prospective employers wary of giving them work and they find it easier to live on National Assistance. Children, ill-clad and dirty, are often rejected by their school fellows, which creates that same "inferior" sentiment which in many cases caused their parents to be "problems".

Neighbourhood pressures add to the difficulties of the family, making its members feel more hopeless than they otherwise would. Sometimes too, the number of official visitors, all in their own way trying to help the family, only confuse them and ultimately all may be rejected.

It is in such a background that a group of 22 home helps, specially selected and trained, have been working during the past year giving practical help and social care to 72 families, involving approximately 285 children.

Some of these families are well-known to all social work agencies in the city as "problems" ; others are found to have deep-seated emotional and relationship difficulties when we are called in to give help at a confinement.

The basis of all our work is to establish the families as self-respecting, self-reliant units in the community. Whilst as a group they all reveal a general pattern of behaviour symptoms, each family is a unique complex of circumstances, only discovered by individual personal treatment.

The training which the home help receives helps her quickly to establish a friendly relationship with the family. On this friendly basis her practical help in cleaning the home, preparing cheap nourishing meals for the children, her guidance in household budgeting, her help in making and mending the family clothing and generally establishing improved social standards, gives her opportunity to discover the underlying causes as to why the family is a problem. She is thus able to encourage its members to enlarge their ability to cope with and overcome their own difficulties.

The particular approach to the manifold difficulties of problem families by the Home Help Service is of great importance in their

rehabilitation. The practical help given is often not obtainable from any other source. Cleanliness is closely allied to self-respect, and one of the first signs of rehabilitation is a sense of pride in the state of the home, children's clothing and mother's own personal appearance.

The moral uplift given by a bright clean living room, a re-decorated child's bedroom or a newly-painted kitchen, as well as from gifts of furniture, bedding and equipment, enables the self-esteem of the family to be restored, and in many cases cuts at the root of marital disharmony.

Much can be done by suggestion, judicious example and help to raise standards of household and family cleanliness. It is often impossible to expect a family to face up to its responsibilities until the material conditions in the home have been ameliorated. The fact that a home help is prepared to go in and tackle a filthy home puts a mother on her mettle; she will be prepared to tackle an almost impossible situation with someone to help her.

It is this kind of help which has been given to the 72 families mentioned earlier in this report. Of these families, ten were new cases referred during the year, and one, where we had previously helped at a maternity case, was re-opened as a problem family at the request of the family doctor.

The new cases were referred to the Service from the following sources :

Housing Department	..	..	..	4
Health Visitors ..	..	..	..	4
General Practitioner	..	..	..	1
Father requested help on mother's desertion..				1

A development of this work during the year took place as a result of the Housing Department's policy to ask for a case conference to discuss the position of any family threatened with eviction and likely to be broken up for arrears of rent. The Service accepted the responsibility for helping four such families to try to straighten out their financial problems and to see that the rent is paid weekly plus something off the arrears. Whilst such families present many difficulties, the threat of eviction has lessened considerably in these four families.

It is difficult to place these families into categories because the problems are individual to each family, but the following table attempts to put them into seven broad categories :

	<i>No. of families helped</i>
1. Families where the main factor is the mental health of the mother	15
2. Families where the main factor is the physically sick mother	5
3. Families disturbed by deep-seated marital and family relationships	18
4. Families where father is unstable, physically and mentally	6
5. Families where the mother lacks training in home-making and mothercraft	23
6. Families where mother is dead and children display behaviour symptoms	2
7. Families where mother has left home and father and children display problem symptoms ..	3

The amount of help given varies considerably, from intensive daily help to the occasional call. Whenever there is an indication that the family's standards are improving the amount of help is decreased, or withdrawn completely, to be re-introduced if the situation calls for it.

Perhaps the most pathetic cases fall into the seventh of the above categories : in one instance the mother left her home and six children. The father, unstable and apathetic was ill and unemployed, and the burden of running the home and caring for the children fell on the eldest girl, a child of 13 years.

An instance of the rehabilitation of a family is illustrated by the work done for a mother, father and seven children which was brought to the notice of the Service by the Health Visitor, when the mother was taken to hospital following a miscarriage. The home, which showed signs of good taste, was in a filthy condition and a bad state of repair. The father was disinterested and the mother, a grammar school girl, quite apathetic. The children were undernourished and dirty. The Children's Department, whose ready co-operation and support with all these families is deeply appreciated, immediately agreed to take the children into care whilst the mother was away, so that the home could be cleaned throughout. This the home helps tackled with a will, and encouraged the father to help with painting and wall-papering. The mother was sent to a convalescent home to recuperate, and came back to a bright clean home with bedding and furniture which we had been able to give. The rest and recreation provided by the mother's stay in hospital and convalescent home, the good meals and care given to the children, and the cleaning and refurnishing of the home, together with the friendliness extended to all its members, have enabled this family to be helped towards a more normal way of life.

A feature of this case was the close collaboration between the Super-

intendent Health Visitor, the Children's Department and the Assistant Organiser responsible for the guidance of the home help, which provided the team work necessary to help the family towards rehabilitation.

It has been possible to withdraw help completely from two families as it was felt they were rehabilitated.

It is not easy to assess the positive progress of the parents ; some of them are so mentally disturbed that there is very little prospect of permanent rehabilitation, and others are practically ineducable. There is, however, definite improvement in home standards and marital relations in some 20 of these families. Of the value of the Service in the welfare of the children, there is no doubt ; without it many of the 285 children involved would have been received into the care of the Local Authority. The Service is expensive, but were it not available and used in this way, the cost to the community would be considerably greater.

Seventeen of these families received help free of charge, under the scheme for the employment of the working hours of six home helps without assessment or charge in the rehabilitation of problem families, approved by the Health Committee. By these means practical help was given to prevent the break-up of these families, which could not have been given, or might possibly have been withdrawn before any improvement could have been seen, had a charge been made.

Infectious Diseases Group

The work of this group has been maintained at about the same level as in the previous year. 16 new cases were helped during 1958 in addition to 37 cases carried over from 1957. The total of 53 cases in 1958, compared with 61 cases in 1957, shows a decline of eight tuberculous cases helped.

When tuberculous patients are discharged from the Isolation Hospital or given treatment at home, a home help is applied for if no relatives are able to help.

The fact that good regular meals are cooked by the home help and that the patient does not need to exert herself in doing her household chores, certainly speeds recovery considerably.

The weekly meetings between Organiser and home helps have made it possible to deal with patients on a social case work basis, and many of the difficulties which tuberculous patients have to face have been eased through actual help and advice from the home help. Close collaboration with the Chest Unit has been very valuable, and I would like to thank Miss Hassall of the Chest Unit for her help during the year.

VENEREAL DISEASE

I am again indebted to the Physicians in charge of the Treatment Centre for the following table of cases treated, etc.

Only one new case of primary syphilis—a male—was reported during the year, but there was some increase in the incidence of gonorrhœa.

Incidence of Venereal Disease and Allied Conditions in 1958 (1957 figures are in brackets)

IN	Syphilis		Gonorrhœa		Other		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	Total
Number of cases under treatment or observation, 1st January, 1958	101 (102)	131 (135)	29 (33)	17 (11)	14 (17)	10 (6)	144 (152)	158 (152)	302 (304)
New patients during 1958 including inward transfers and returned cases	18 (28)	27 (38)	131 (90)	52 (44)	414 (417)	260 (242)	563 (535)	339 (324)	902 (859)
Totals	119 (130)	158 (173)	160 (123)	69 (55)	428 (434)	270 (248)	707 (687)	497 (476)	1,204 (1,163)
OUT									
Number discharged cured or needing no treatment	16 (23)	25 (31)	108 (76)	45 (31)	401 (396)	258 (229)	525 (495)	328 (291)	853 (786)
Defaulted	3 (3)	12 (8)	13 (8)	4 (5)	15 (18)	9 (8)	31 (29)	25 (21)	56 (50)
Transferred	4 (3)	3 (3)	10 (10)	4 (2)	3 (6)	— (1)	17 (19)	7 (6)	24 (25)
Remaining at 31st Dec., 1958	96 (101)	118 (131)	29 (29)	16 (17)	9 (14)	3 (10)	134 (144)	137 (158)	271 (302)
Totals	119 (130)	158 (173)	160 (123)	69 (55)	428 (434)	270 (248)	707 (687)	497 (476)	1,204 (1,163)

NATIONAL ASSISTANCE ACT, 1948

SECTION 47

Six old people were referred to the Department for consideration for compulsory removal to hospital under this Act. General practitioners referred three, Public Health Inspectors two and the Director of Welfare Services one. After visits had been paid, although all would have been better off in hospital or Part III Accommodation, it was not thought that compulsory removal was justified. In five cases arrangements were made for home helps to assist, one case refusing a home help. Two patients later went into hospital voluntarily and two went to live with relatives.

CO-ORDINATION OF FAMILY CARE

CHILDREN NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES

The Medical Officer of Health continued to act as Co-ordinating Officer for children neglected or ill-treated in their own homes under the terms of the joint Circular of the Ministries of Health and Education and of the Home Office.

The work which the Department undertakes in this connection is very closely linked with the prevention of break-up of families and prevention of eviction dealt with in the next section of this Report.

There were 19 new cases referred in 1958 (36 last year). In addition, 14 cases were being dealt with which had been referred in previous years.

<i>Referred by</i>					<i>Total</i>
Chief Constable	..	..	..	..	5
Health Visitor	..	..	..	..	2
Maternity and Child Welfare Department				..	3
N.S.P.C.C.	..	..	..	..	1
Education Department			..	..	4
Home Help Department		..	..	..	2
Children's Department		..	..	..	1
Family Service Unit		..	..	..	1
					—
					19
					—

Cases were referred to the following Departments :

N.S.P.C.C.	..	..	..	..	6
Maternity and Child Welfare Department				..	2
Children's Department		..	..	..	2
Home Help Department		..	..	..	3
Public Health Inspectors		..	..	..	2
Health Visitors	..	..	..	..	3
Family Service Unit		..	..	..	1
					—
					19
					—

<i>Action taken or final decision</i>	<i>Neglected</i>	<i>Not Neglected</i>	<i>Total</i>
N.S.P.C.C. to supervise ..	6	—	6
Children admitted to day nursery and mother for convalescence ..	—	1	1
Children's Officer to deal ..	7	1	8
Housing Department to re-house ..	1	—	1
Public Health Inspector to help ..	—	1	1
Home Help Department to assist ..	3	1	4
Health Visitor to supervise ..	5	—	5
No action necessary	3	—	3
Education Department to take action for poor school attendance with view to committing children to care	1	—	1
Mental Health Department to supervise	1	—	1
Family Service supervising ..	1	—	1
Family left Leicester	1	—	1
	—	—	—
	29	4	33
	—	—	—

These 33 cases include 14 referred in previous years.

Case conferences were held on 15 families, six of which had been referred in the previous year. As a result of the conferences the main responsibility for the 15 families was agreed as follows :

Home Help Department	2
Children's Department	5
Health Visitor	3
Maternity and Child Welfare Department ..	1
N.S.P.C.C.	2
Education Department	1
Family Service Unit	1
	—
	15
	—

The co-ordinating arrangements are continuing to work smoothly.

HEALTH OF CHILDREN

PREVENTION OF BREAK-UP OF FAMILIES AND ACTION TO DEAL WITH RENT ARREARS

Work continued during the year on the lines of Ministry of Health Circular 27/54. A most important and valuable new development was that the Housing Manager referred to the Health Department families threatened with eviction for arrears of rent so that conferences could be arranged and an attempt made by the agencies concerned to sort out the families' difficulties and prevent eviction.

The care of problem families is well co-ordinated in Leicester. Health visitors, particularly, deal with incipient problem families and with those problem families who in the main do not need intensive rehabilitation. At the end of 1958 they had primary responsibility for 171 incipient problem families and 48 problem families. Home helps were responsible for the care of 47 problem families. In addition there were 13 families which they were no longer helping but which might at any time require help. The Family Service Unit, which receives a grant from the City Council, was responsible for 39 families. The particular agency looking after a case is known to other agencies concerned with children in the city so that there is no duplication of work or visiting.

I am indebted to the Secretary of the Family Service Unit for the following statistics of their work :

Families being visited 1st January, 1958	..	36
Cases opened during the year	.. ..	8
		—
		44
Cases closed during the year	.. ..	5
		—
Families being visited at 31st December, 1958	..	39
		—

The Housing Manager notified 39 cases to the Medical Officer of Health during the year, under the arrangement to deal with families threatened with eviction because of rent arrears. Officers of that department had given a considerable amount of help to all the cases before referral. Case conferences were held on all these families, representatives of interested agencies being invited. In all cases the following officers, their representatives, or representatives of the department were invited :

Housing Manager
Children's Officer
Director of Education
Director of Welfare Services
Probation Officer
National Assistance Board
Ministry of Labour (Local Office)
Charity Organisation Society
N.S.P.C.C.
Family Doctor
Senior Medical Officer for M. and C.W.
Senior School Medical Officer
Mental Health Officer
Home Helps
Health Visitors
Student Health Visitors

Other individuals or agencies were invited as indicated, for example, teachers, clergy, psychiatrists, etc. The family doctor was always consulted as to whether there was any medical reason for the arrears. Very good co-operation was received from all concerned.

The conferences, under the chairmanship of the Deputy Medical Officer of Health, were well attended and were most useful. They were always attended by the Chief Investigating Officer of the Housing Department who is responsible for dealing with tenants in arrears, and that department's Chief Welfare Officer. At the conferences as full information about the case as possible was obtained. For example, was there a medical reason for the default ? What was the husband's work record ? What was the family income and how was it spent ? Were there other debts ? What other signs of social inadequacy were present ? Was the family a problem family and already known to different officers as such ? Sometimes conferences were adjourned to get further information about a case.

Having obtained as full information as possible, the case was discussed and a line of action decided. To find the best course is frequently most difficult. Should the first step be to give material help to the family and to what extent can the family be rehabilitated ? Is it a viable family or is the non-payment of rent a symptom of a desire on the part of the parents each to go his or her own way ? In all cases an attempt was made initially at rehabilitation. This usually involved making one agency responsible for the case, perhaps with secondary help from

others. For example, the Housing Department might have the main responsibility, and one of its officers would arrange for help from the Charity Organisation Society, or the Home Help Department might be given the responsibility of rehabilitation, meanwhile ensuring that the rent was paid. Sometimes at follow-up conferences a change might be made by giving another agency the primary responsibility—not because there was any reflection on the capabilities of the first but in view of further information the second might be thought more suitable.

A most valuable feature of these conferences is that they are attended by the Secretary of the Charity Organisation Society. This Society can make a money grant, in selected cases, of £5 to £10 which is administered weekly to help families to adjust their housekeeping expenses in such a way that the threat of eviction for non-payment of rent is avoided. This method has proved successful in some cases. The Society also helped with clothing in a number of cases.

Nine families showed various and long-standing matrimonial disharmony. It is interesting that although the work and value of the Marriage Guidance Council was well known to those at the conferences, because of the nature and severity of the disagreement it was not thought advisable to refer the parents to the Council. Perhaps later, after some preliminary rehabilitation has been undertaken and the confidence of the parents gained, it may be possible.

Five parents—four husbands and one wife—suffered from chronic mental illness of long standing. Full investigation and necessary treatment had been given and the individuals were now as well as they might be expected to become. Two husbands were mental defectives, both under the statutory supervision of the Mental Health Department. In one of these cases the mother was also a mental defective. One father had chronic physical illness which made it difficult for him to retain a job.

The agencies given primary and secondary responsibility are summarised below. The table is necessarily a simplification as, for example, in one case the Probation Officer already dealing with the case took primary responsibility and was to arrange for help via the Charity Organisation Society. The National Assistance Board was to see that the rent was paid weekly and consider referring the husband to the Government Rehabilitation Centre. In several cases the Education Department arranged for free meals at school, and the School Health Service made special arrangements for a child, e.g. admission to the Open Air School :

		<i>Primary Responsibility</i>	<i>Secondary Responsibility</i>
Housing Welfare Department	..	8	4
Health Visitor	..	6	9
National Assistance Board	..	6	13
N.S.P.C.C.	.. ..	4	3
Charity Organisation Society	..	4	11
Probation Department	..	4	—
Family Service Unit	..	2	—
Home Help Department	..	2	1
Mental Health Department	..	2	—
Case resolved itself	..	1	—
Children's Department	..	—	1
Education Department	..	—	2

Follow-up conferences were necessary on 21 of these families.

Officers of the National Assistance Board played a most important part. They arranged to pay rent direct to the Housing Department in one case. This was in accordance with the conditions given in the Board's letter of 26th July, 1954, given in Appendix 2 of "Unsatisfactory Tenants"—the Sixth Report of the Housing Management Sub-Committee of the Central Housing Advisory Committee—which states "Our power to pay any part of an assistance grant to a third party is limited to cases where this would be in the interests of the applicant and it is for this reason that we can only pay rents direct to landlords, even Local Authority landlords, where the payment of rent cannot be secured by any other means and the tenant may be in danger of eviction". In eight cases they arranged to withhold the rent element each week until the applicant returned to the office with the rent book to show the rent had been paid. Such measures can only be recommended when rehabilitation has been tried and failed as they reduce considerably the response of a family to improve. A practical disadvantage is that they are only successful when a family is on continued National Assistance—not when the father is frequently on and off work. Officers of the Board, in conjunction with the Ministry of Labour local office, attempted to get work for four of the husbands.

It is interesting that only 15 of the 39 families were classed as problem families, 11 being supervised by health visitors, one by the home helps, one by the Family Service Unit, one by both the health visitors and home helps and one by the Family Service Unit and health visitor. In 14 cases, the family's general social condition, apart from the rent arrears, appeared not too unsatisfactory and, in fact, at conferences,

workers outside the Health Department, in some cases, were surprised to hear of the arrears.

Three families were evicted. One as far as could be ascertained did not wish to continue living in a Corporation house, and took the position resulting from rent arrears as a useful way out, one of the families went to live with the father's mother and one to live in a private house.

On reviewing this work, extending over a full year, I think it has been well worth while and ensures that in Leicester full co-ordination of family rehabilitation is undertaken and that evictions from Corporation houses remain few and cannot happen until everything possible has been done to prevent them.

My thanks are due to the Chief Officers and staff of the official and voluntary agencies who helped so generously during the year, and particularly to the Housing Manager and his staff for their very full co-operation.

I would particularly like to thank Dr. A. I. Ross, Deputy Medical Officer of Health, for the excellent work he has done when acting as Chairman of the Conferences referred to in this Section.

BLIND PERSONS

I am indebted to Mr. K. J. Powell, Director of Welfare Services, for the information included in this Section.

CLASSIFICATION ACCORDING TO AGE (AT DATE OF REGISTRATION) OF PARTIALLY SIGHTED PERSONS REGISTERED IN 1958

	0-	1-	2-	3-	4-	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Total
Cataract .. Male	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	2
" .. Female	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	-	3
Glaucoma .. Male	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
" .. Female	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Retrolental Fibroplasia :																			
Male	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Female	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Others... .. Male	-	-	-	-	-	-	-	-	-	1	-	-	1	-	1	-	-	-	3
" .. Female	-	-	-	-	1	-	-	1	-	1	-	1	1	1	2	-	1	-	9
Grand Total ..	-	-	-	-	1	-	-	1	-	2	-	2	2	1	3	1	4	-	17

These figures include three persons (one male, two female) from Blind Register

**CLASSIFICATION ACCORDING TO AGE (AT DATE OF REGISTRATION)
OF BLIND PERSONS REGISTERED IN 1958**

		0-	1-	2-	3-	4-	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Total
Cataract	.. Male	-	-	-	-	-	-	-	-	-	-	1	-	-	2	8	4	1	-	16
"	.. Female	-	-	-	-	-	-	-	-	-	-	-	-	2	2	6	5	3	1	19
Glaucoma	.. Male	-	-	-	-	-	-	-	-	-	-	-	-	-	2	3	2	-	-	7
"	.. Female	-	-	-	-	-	-	-	-	-	-	-	-	1	2	2	-	-	-	5
Retrolental Fibroplasia :																				
	Male	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Female	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Others..	.. Male	-	-	-	-	-	1	-	-	-	2	-	3	3	1	3	2	-	-	15
"	.. Female	-	-	-	-	-	-	-	-	-	-	1	5	2	5	9	2	3	2	29
Grand Total ..		-	-	-	-	-	1	-	-	-	2	2	8	8	14	31	15	7	3	91

These figures include eight persons (two male, six female) from Partially Sighted Register

Follow-up of Registered Blind and Partially Sighted Persons

(1) Number of cases registered during the year in respect of which para. 7(c) of Form B.D.8 recommends :	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment ..	15	11	—	39
(b) Treatment (medical, surgical or optical) ..	21	—	—	11
(2) Number of cases at (1) (b) above, which on follow-up action have received treatment	6	—	—	8

Included in the 65 cases shown in the table in which no treatment was recommended are 33 cases in which continued hospital supervision was advised.

There were 10 cases originally recommended for treatment in which this was later found to be inadvisable or the patient was unwilling.

HOUSING

New Housing

During the last five years the following houses have been built in Leicester :

	1954	1955	1956	1957	1958	Total
By Housing Committee ..	1,530	1,205	1,415	1,277	675	6,102
By private builders ..	629	534	426	384	483	2,456
Totals	2,159	1,739	1,841	1,661	1,158	8,558

The marked drop in the number of Corporation houses built in 1958 can only be the subject of considerable regret.

The 675 houses built in 1958 were on the following estates :

Thurnby Lodge (County)	..	15
Thurcaston Road	..	5
Eyres Monsell (County)	..	579
Braunstone Frith	..	1
Nether Hall (City)	..	8
„ „ (County)	..	19
St. Matthew's (Phase I)	..	48
		<hr/>
		675
		<hr/>

The total number of houses built by the Corporation since the war, i.e. from 1946 to the end of 1958, was 12,579.

Slum Clearance

Clearance Orders	Houses	Other Buildings
51	769	14

In 1958, as in previous years, considerable progress in clearing the city of its slums has been made.

Fifty-one areas were represented during the year as follow :

Area No.	Name		C.O. or C.P.O.	Number of houses	Other buildings
180	Hampden Street	.. ..	C.P.O.	13	1
181	Woodhouse Street	.. ..	C.P.O.	13	—
182	Spittlehouse Street	.. ..	C.P.O.	2	—
183	Painter Street	.. ..	C.P.O.	15	—
184	St. George Cottages,	Colton			
	Street	.. ..	C.O.	4	—
185	The Conery	.. ..	C.O.	8	—
186	Mill Hill, No. 1	.. ..	C.O.	2	—
187	Mill Hill, No. 2	.. ..	C.O.	4	—
188	St. Bernard Street	.. ..	C.O.	6	—
189	Northgate Street	.. ..	C.O.	2	—
190	Noble Street	.. ..	C.O.	5	—
191	Clara Street	.. ..	C.O.	8	—
192	Sherrard Road	.. ..	C.O.	10	—
193	Occupation Road	.. ..	C.O.	16	—
194	St. Saviour's Road	.. ..	C.O.	4	—
195	Vulcan Cottages, Vulcan Road	.. ..	C.O.	13	—
196	Old Milton Street	.. ..	C.O.	8	—
197	Crown Street	.. ..	C.O.	20	—
198	Raglan Street	.. ..	C.O.	48	—
199	Bow Street	.. ..	C.P.O.	9	—
200	Cramant Cottages, King Street	.. ..	C.O.	6	—
201	Regent Road	.. ..	C.P.O.	7	1
202	Ashwell Street	.. ..	C.P.O.	18	1
203	Wellington Street	.. ..	C.P.O.	5	—
204	Carlton Street, No. 1	.. ..	C.P.O.	5	—
205	Carlton Street, No. 2	.. ..	C.P.O.	9	—
206	Clinton Street	.. ..	C.P.O.	18	1
207	Loughborough Road	.. ..	C.P.O.	8	—
208	Checketts Road, No. 1	.. ..	C.P.O.	21	—
209	Checketts Road, No. 2	.. ..	C.P.O.	21	—
210	Checketts Road, No. 3	.. ..	C.O.	7	—
211	Checketts Road, No. 4	.. ..	C.O.	3	—
212	Checketts Road, No. 5	.. ..	C.O.	2	—
213	Little Avenue	.. ..	C.O.	6	—
214	Victoria Road North, No. 1	.. ..	C.O.	4	—
215	Victoria Road North, No. 2	.. ..	C.O.	56	—
216	Humberstone Terrace, Humber-				
	stone Road	.. ..	C.P.O.	9	—
217	Graham Street	.. ..	C.P.O.	10	2

Area No.	Name	C.O. or C.P.O.	Number of houses	Other buildings
218	Bell Lane	C.P.O.	9	—
219	Alberta Street	C.P.O.	28	4
220	Merridale Road	C.O.	109	—
221	Oxford Street	C.O.	6	—
222	Grange Lane	C.O.	4	—
223	Conduit Street, No. 1 ..	C.O.	6	—
224	Conduit Street, No. 2 ..	C.O.	6	—
225	Upper Conduit Street, No. 1 ..	C.P.O.	4	—
226	Upper Conduit Street, No. 2 ..	C.P.O.	2	—
227	East Goscote Street	C.P.O.	136	4
228	Upper Conduit Street, No. 3 ..	C.P.O.	15	—
229	Upper George Street	C.P.O.	7	—
230	Brunswick Street	C.P.O.	12	—
			769	14

In addition, 40 individual houses have been represented for demolition, and a further seven were demolished.

Closing Orders were made under Section 17 of the Housing Act, 1957, on 15 houses.

Individual Unfit Houses

Act under which Action taken	Houses represented to Health Com- mittee	Houses on which Order made	Statutory Under- takings not to Re-Let	Houses vacated	Awaiting removal
Housing Act, 1957, Section 17—Dem. Orders. From July, 1939	383	325	47	345	38
Housing Act, 1957, Section 17— Closing Orders ..	72	69	1	62	10
Housing Subsidies Act, 1956 ..	30	30	—	25	5
Voluntary Under- takings.. ..			21	21	—

Report on the Chest Clinic for 1958

by

C. M. CONNOLLY, M.D., M.R.C.P., D.P.H.

This report deals with the Tuberculosis work of the Chest Clinic.

The improvement in the control of the disease which was noted in 1957 has been maintained during 1958, and there has been a further reduction in the number of new cases and deaths.

It has often been stated recently that the improvement in the control of tuberculosis will lead to the elimination of the disease within a few years. This is a much too optimistic forecast for a disease such as tuberculosis. A more realistic appraisal of the present position is that a steady reduction in the number of new infections may be expected each year, but that control measures will have to be vigorously carried out for many years to come.

Certainly little change has yet been noted in the volume of work in connection with tuberculosis in the Chest Clinic. While the greatest emphasis must continue to be laid on the control of tuberculosis, a considerable amount of work is concerned with non-tuberculous chest diseases, and it is expected that this side of the Chest Clinic activities will increase in the coming years.

New Cases

Two hundred and sixty-nine new cases of tuberculosis were registered during the year, as compared with 273 in 1957. These figures include cases, previously notified as tuberculous elsewhere, who came to live in the City of Leicester during the year. A number of these "transfers in" are young adults who have passed through the Government Training Centre in Humberstone Lane, and subsequently settle in the city, where they find suitable work. As the number of "transfers in" varies each year, a more accurate figure of the number of new cases is obtained by excluding them. When "transfers in" are excluded, the number of new cases found in 1958 was 189, as against 210 in 1957.

The pulmonary cases decreased by 20. The non-pulmonary cases decreased by one.

These new cases of tuberculosis are analysed in the tables that follow. It will be seen from the tables that the majority of new cases occurred in the older male age groups.

The following table gives the number of new cases, including "transfers in", since 1927 :

1927	Pulmonary 700	Non-pulmonary 80	Total 780
1928	" 668	" 117	" 785
1929	" 657	" 77	" 734
1930	" 582	" 66	" 648
1931	" 511	" 61	" 572
1932	" 442	" 69	" 511
1933	" 438	" 74	" 512
1934	" 331	" 72	" 403
1935*	" 460	" 100	" 560
1936	" 355	" 79	" 434
1937	" 345	" 88	" 433
1938	" 310	" 84	" 394
1939	" 299	" 84	" 383
1940	" 343	" 101	" 444
1941	" 390	" 75	" 465
1942	" 365	" 85	" 450
1943	" 359	" 93	" 452
1944	" 392	" 52	" 444
1945	" 355	" 60	" 415
1946	" 440	" 55	" 495
1947	" 458	" 68	" 526
1948	" 403	" 78	" 481
1949	" 410	" 51	" 461
1950	" 555	" 46	" 601
1951	" 443	" 46	" 489
1952	" 473	" 41	" 514
1953	" 455	" 39	" 494
1954	" 392	" 56	" 448
1955	" 361	" 33	" 394
1956	" 316	" 29	" 345
1957	" 249	" 24	" 273
1958	" 248	" 21	" 269

*City Boundary extended and population increased by 20,000. The figure given for 1935 included 139 pulmonary and 23 non-pulmonary taken over from the County.

The following table shows the sources from which the cases of tuberculosis registered in 1958 came :

Transferred in from other Areas	80
Home Contacts of Notified Cases	16
Scheme for X-ray of Pregnant Women	7
Referred by the Mass Radiography Unit	28
Death Adjustments	4
National Service Recruits	3
Cases referred by Service Medical Officers	2
Cases notified by Hospital Doctors	32
Cases referred by General Practitioners	97
	<hr/>
	269
	<hr/>

The following table gives the sex and age periods of those notified during 1958 :

Age Periods ..	0-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65+	Total
Pulmonary											
Males ..	4	4	5	11	7	14	13	19	24	13	114
Females ..	1	1	5	9	14	12	3	6	3	3	57
Non-pulmonary											
Males ..	—	1	—	—	—	4	1	—	1	1	8
Females ..	—	1	3	2	1	—	1	—	—	2	10

The following table gives the sex and age periods of those transferred in from other areas during 1958 :

Age Periods ..	0-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65+	Total
Pulmonary											
Males ..	—	1	—	2	9	21	7	6	4	1	51
Females ..	—	3	—	2	4	11	6	—	—	—	26
Non-pulmonary											
Males ..	—	—	—	—	—	—	—	—	—	—	—
Females ..	—	—	—	—	—	1	—	2	—	—	3

The following table gives the number of young adults notified in the age periods 15-19 and 20-24 during the past six years :

Pulmonary Tuberculosis in Young Adults (Notifications)
(15-24) during the past six years

Ages	1953		1954		1955		1956		1957		1958	
	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24
Males ..	23	23	8	16	9	18	9	14	9	9	11	7
Females ..	24	21	17	19	16	12	14	12	9	11	9	14
Total ..	47	44	25	35	25	30	23	26	18	20	20	21
Total both sexes ..	91		60		55		49		38		41	

Contacts

The following table shows the number of contacts who attended for chest X-ray during the past six years. The number of contacts who were found to have tuberculosis in 1958 was 16, as compared with nine in 1957 :

	1953	1954	1955	1956	1957	1958
Number of contacts examined ..	2,076	2,602	2,588	2,986	2,554	2,206
Number of contacts found to have tuberculosis ..	27	20	26	30	9	16

School Case-Finding Scheme

	1953	1954	1955	1956	1957	1958
Tuberculin positive school entrants and their contacts ..	1,686	555	344	462	287	46
Number found to have tuberculosis ..	16	2	3	5	8	—

Radiological Examination of Expectant Mothers

Two thousand three hundred and thirty-seven expectant mothers attended for chest X-ray, and seven cases of pulmonary tuberculosis were discovered.

This is the largest number of cases found so far, and gives an indication of the importance of this form of investigation. The risk to the infant of serious infection after birth, from unsuspected tuberculosis in the mother, is well known, and this can be prevented by treatment during pregnancy.

	1954	1955	1956	1957	1958
Number of Expectant Mothers					
X-rayed	767	1,797	2,597	2,347	2,337
Number found to have tuberculosis	1	3	6	4	7

B.C.G. Vaccination

B.C.G. vaccination has again been offered to all tuberculin negative contacts. 708 vaccinations were performed during the year, as against 846 the previous year.

No. of B.C.G.	1950	1951	1952	1953	1954	1955	1956	1957	1958
vaccinations	191	855	622	532	717	777	831	846	708

Rehabilitation

The facilities offered by the Ministry of Labour in the rehabilitation of tuberculous cases have been fully utilised during the year, and suitable cases have been referred to the Industrial Rehabilitation Unit and Government Training Centre in Humberstone Lane, Leicester.

The Spero Holiday Scheme organised by The Chest and Heart Association has been found helpful in obtaining suitable holiday accommodation for cases who would otherwise be unable to obtain a holiday. The help given to needy tuberculous cases during the year by the Friends of Groby Road and the Charity Organisation Society has been much appreciated.

Chronic Cases

Long-term chemotherapy is now an established form of treatment in tuberculosis. It is of considerable value in chronic cases in keeping the patient's sputum negative and non-infectious, and this form of treatment has been continued throughout the year.

Analysis of the Tuberculosis Register showed 2,110 respiratory cases at the end of 1958. Of this number 1,164 were quiescent cases, 529 cases were still on treatment but were expected to become quiescent, and 417 were chronic cases. Of the 417 chronic cases, 284 (68%) were men, and 133 (32%) were women.

Regular sputum examinations were carried out and only 67 of the 417 chronic cases were found to have a positive sputum at any time during the year. Fifty of the 67 positive cases harboured tubercle bacilli which were resistant to the main anti-tuberculous drugs, and this was the chief cause of failure to obtain sputum conversion in the chronic cases.

The spread of these resistant tubercle bacilli is a possibility which has been kept constantly in mind, but no new case discovered in 1958 was found to have been infected by resistant bacilli.

DEATHS *(Local figures)*

Deaths due to pulmonary tuberculosis	..	20
Deaths due to non-pulmonary tuberculosis	..	4

The pulmonary deaths (20) were seven less than in 1957. The non-pulmonary deaths (4) were three more than in 1957.

Of the 24 deaths during the year, six were not known to be tuberculous until examination after death, and a further three died within one month of notification, and before treatment could be expected to have much effect on the disease. The majority of the deaths occurred in chronic cases. There were no deaths under the age of 30.

Number of Deaths from Tuberculosis in Leicester during the past 19 years

Year	Phthisis		Other Tuberculous Diseases		Total Tuberculous Deaths	
	Deaths	Rate per 100,000 Population	Deaths	Rate per 100,000 Population	Deaths	Rate per 100,000 Population
1940	200	77	34	13	234	90
1941	197	74	39	15	236	89
1942	166	64	37	14	203	78
1943	179	70	27	11	206	81
1944	175	68	20	8	195	76
1945	153	60	30	12	183	71
1946	162	60	26	10	188	70
1947	186	67	21	8	207	75
1948	167	60	20	7	187	67
1949	153	54	21	7	174	61
1950	134	47	7	2	141	49
1951	98	34	7	2	105	36
1952	96	33	6	2	102	35
1953	68	24	5	2	73	25
1954	65	23	6	2	71	25
1955	57	20	2	1	59	21
1956	27	9	3	1	30	10
1957	27	9	1	1	28	10
1958	20	7	4	1	24	8

The following tables give the Age, Sex Distribution and Occupation of those dying from Pulmonary Tuberculosis during 1958 :

Age and Sex Distribution of Deaths from Phthisis in 1958

Age Period	Males	Females	Total
0— 1 ..	—	—	—
2— 4 ..	—	—	—
5— 9 ..	—	—	—
10—14 ..	—	—	—
15—19 ..	—	—	—
20—24 ..	—	—	—
25—34 ..	—	1	1
35—44 ..	1	—	1
45—54 ..	2	1	3
55—64 ..	8	2	10
65+ ..	4	1	5
All Ages ..	15	5	20

Occupations of Persons Dying from Phthisis in 1958

	M.	F.		M.	F.
Hosiery Trade			Shoe Trade—continued		
Wool Spinner ..			Dyer's Labourer ..	1	—
Elastic Web Winder ..	—	1	Leather Factor ..	1	—
	—	1	Schoolteacher ..	—	1
Engineering			Corporation Lorry		
Inspector	1	—	Driver	1	—
Fitter	1	—	Railway Locomotive		
Miller	1	—	Fitter	1	—
Warehouseman ..	1	—	Liftman	1	—
Labourer	1	—	Occupations not stated		
Factory Cleaner ..	1	—	(includes married		
			women,* , widows,		
Shoe Trade			children and persons		
Warehouseman ..	1	—	of no occupation ..	—	2
Puller Over	1	—			
Slugger	1	—			
Clicker	1	—		15	5

*A large number of married women are engaged in the Hosiery Trade, but these are not included, for in the case of deaths of married women, and widows, only the husband's occupation is registered.

ANALYSIS OF DEATHS

Pulmonary Cases on Chest Clinic Register

Stage when first examined		Died within one month of notification	Within three months	Within six months	Within twelve months	Within two years	Within three years	Within five years	Over five years
T.B. - ve cases ..	—	—	—	—	—	—	—	—	—
T.B. + ve Stage 1 ..	—	—	—	—	—	—	—	—	—
T.B. + ve Stage 2 ..	9	—	—	1	1	—	—	—	7
T.B. + ve Stage 3 ..	6	3	—	—	—	—	—	—	3
Total	15	3	—	1	1	—	—	—	10

In addition there were three deaths of patients who had not been notified as suffering from tuberculosis, and there were two posthumous notifications. This gives a total of 20 pulmonary deaths.

Deaths from Pulmonary Tuberculosis in Children (0-14) and in Young Adults (15-24) during the past six years

Years ..	1953		1954		1955		1956		1957		1958	
Ages ..	0-14	15-24	0-14	15-24	0-14	15-24	0-14	15-24	0-14	15-24	0-14	15-24
Males ..	—	4	—	1	—	1	—	—	—	—	—	—
Females ..	—	2	—	2	—	1	1	—	—	—	—	—
Total ..	—	6	—	3	—	2	1	—	—	—	—	—
Total each year	6		3		2		1		—		—	

Non-Pulmonary Tuberculosis Deaths (All Ages)

Caecum	Renal	Pericardium	Total
1	2	1	4

Deaths from Tuberculous Meningitis in Children (0-14)
during the past six years

	1953	1954	1955	1956	1957	1958
Males	—	—	—	—	—	—
Females ..	1	1	—	—	—	—
Total	1	1	—	—	—	—

Recovered Cases

During the past year the names of 221 patients were removed from the register as having “recovered”. Of these, 204 were pulmonary and 17 non-pulmonary. Of the pulmonary cases, 99 had had tubercle bacilli in their sputum.

VISITS

Visits paid by Health Visitors	..	..	..	5,009
Visits paid by Home Nurses	..	..	..	3,893

Chest Clinic as the “Centre of Diagnosis”

Notes from general practitioners in Leicester requesting an opinion on 3,707 patients—2,631 were referred for the first time, the remainder were cases who had been before—were dealt with during the past twelve months.

Clinical Examinations

	Men	Women	Children	Total
First examinations ..	655	467	132	1,254
Re-examinations ..	2,846	1,992	306	5,144

Radiological Examinations

1951	1952	1953	1954	1955	1956	1957	1958
15,146	14,941	18,094	15,453	17,536	18,525	16,943	15,586

Total Attendances

Total attendances	19,052
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ANALYSIS OF CASES ON CHEST CLINIC REGISTER

DIAGNOSIS	Pulmonary			Non-Pulmonary			Total			Grand Totals
	Men	Women	Children	Men	Women	Children	Men	Women	Children	
A. New Cases examined clinically and/or radiologically :										
(a) Definitely T.B.	91	49	14	6	7	5	97	56	19	172
(b) Diagnosis not completed ..	—	—	—	—	—	—	164	113	34	311
(c) Non-Tuberculous	—	—	—	—	—	—	1,338	2,721	360	4,419
B. New contacts examined during the year :										
(a) Definitely T.B.	2	5	9	—	—	—	2	5	9	16
(b) Diagnosis not completed ..	—	—	—	—	—	—	8	1	7	16
(c) Non-Tuberculous	—	—	—	—	—	—	275	231	203	709
C. Cases written off Chest Clinic Register :										
(a) Recovered ..	75	114	15	8	6	3	83	120	18	221
(b) Non-Tuberculous	—	—	—	—	—	—	1,810	3,029	625	5,464
D. Number of cases on Clinic Register on 31st December, 1958 :										
(a) Definitely T.B.	1,151	811	148	61	97	27	1,212	908	175	2,295
(b) Diagnosis not completed ..	—	—	—	—	—	—	311	250	66	627
1. Number of cases on Clinic Register on 1st January, 1958, including observation cases ..			3,043	2. Number of cases transferred in from other areas.					80	
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, cases "lost sight of" and cases where diagnosis has not been established. ..			115	4. Cases written off during the year as dead (all causes) ..					44	
5. Number of attendances at the Clinic for all purposes ..			19,052	6. Number of chest X-ray films taken during the year.. ..					15,586	
7. Number of persons receiving B.C.G. vaccine, at the Clinic, during the year			708	8. Number of visits by the Health Visitors to homes of patients for Clinic purposes					5,009	
9. Number of patients visited by the Home Nurses during the year			82	10. Number X-rayed under the scheme for X-ray of pregnant women					2,337	
11. Number of patients to whom free milk was granted by the Local Health Department ..			174	12. Number of patients to whom beds and/or bedding have been loaned by the Local Health Department					40	

LEICESTER AREA MASS RADIOGRAPHY UNIT REPORT FOR 1958

I am indebted to Dr. E. M. Quinn, Medical Director, for the following Report :

As in previous years, the Unit arranged to spend its time between the city and county districts. The groups X-rayed in the city consisted of the general public, factory and office workers, doctors' referrals, nursery staffs, home helps, health visitors, school staffs, and wayfarers, school children who were positive reactors to the tuberculin skin test and, in addition, those children 14 years of age and over who had not been skin tested. Intending teachers leaving the City Training College, and entrants to the teaching profession, were X-rayed. This is a requirement of the Ministry of Education. The Unit has also co-operated where there have been active cases discovered in industry, and where it was felt desirable to X-ray as many of the contact employees as possible.

In addition, it was considered that the industrial area to the north east of the city (Barkby Road and Humberstone Lane area) could usefully be surveyed. In this respect the Unit X-rayed the employees of 27 factories, the total number X-rayed being 1,010. Only one or two factories notified of the survey failed to co-operate, and these were very small concerns. It is regretted, however, that although the X-raying was arranged quite near to the factories, all employees did not take advantage, but as the scheme is voluntary, very little can be done regarding this. Two active cases of pulmonary tuberculosis were found, giving an incidence rate of two per 1,000, which is higher than the overall rate for the year.

The statistical report shows that there has been a decrease in the number X-rayed this year—25,150 (37,808 in 1957). This is approximately 50% of the total number X-rayed in the city and county. Twenty-six cases of active pulmonary tuberculosis were discovered (39 cases in 1957). This gives a rate of 1.03 per 1,000, which is the same incidence rate as in 1957. The wayfarers again proved to have a high incidence rate—66.6 per 1,000. Whilst the yield from this group is high, it is exceedingly difficult to carry out any further follow-up investigation, owing to the constant movement from town to town.

Doctors' referrals : 557 doctors' referrals were X-rayed. Two cases of active pulmonary tuberculosis were discovered, giving an incidence rate of 3.6 per 1,000 (8.4 per 1,000 in 1957).

Since the previous report, there has been a change in the method of recording pulmonary tuberculosis cases at the General Register Office. Such cases are now classified as pulmonary tuberculosis "requiring close supervision", and pulmonary tuberculosis requiring "occasional supervision". The figures quoted above only deal with cases of "close supervision".

MASS RADIOGRAPHY UNIT. LEICESTER, 1958

	Miniatures		Large Films		Clinical Examinations		T.B. Close Supervision		Rate per 1,000	T.B. Occasional Supervision		Bronchiectasis		Cardiac		Pneumoconiosis		Carcinoma	
	M.	F.	M.	F.	M.	F.	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Public Sessions ..	3,911	4,049	219	267	60	43	4	4	1.0	4	4	2	-	9	8	1	-	3	1
Doctors' Referrals..	296	261	77	59	32	16	1	1	3.6	1	-	1	1	3	2	1	-	2	1
Organised Groups..	6,103	4,459	354	289	87	45	5	3	.75	2	4	-	2	9	3	6	-	2	-
Schools ..	2,100	2,092	127	138	27	18	2	1	.71	-	1	-	-	2	-	-	-	-	-
Colleges ..	540	707	23	35	8	3	-	1	.8	2	-	-	-	-	-	-	-	-	-
Wayfarers ..	43	2	7	-	6	-	3	-	66.6	2	-	1	-	-	-	1	-	-	-
N.S.R. ..	587	-	-	-	-	-	1	-	1.7	3	-	5	-	1	-	-	-	-	-
TOTAL ..	13,580	11,570	807	788	220	125	16	10	1.03	14	9	9	3	24	13	9	-	7	2
	25,150		1,595		345		26		—	23		12		37		9		9	

Report on Maternity
and Child Welfare

for the year 1958

by

T. A. I. REES, B.Sc., M.B., B.Ch., D.P.H., D.I.H., D.C.H., D.Obst.R.C.O.G.
(Senior Medical Officer for Maternity and Child Welfare)

STATISTICS

Birth-rate

There were 2,282 male births and 2,158 female births, a total of 4,440, giving a birth-rate of 16.0 (15.99) per 1,000 population.

Of the total births (4,440) 321 were illegitimate (161 males and 160 females) giving an *illegitimate birth-rate* of 7.2 per 100 live births.

Stillbirths

There were 97 stillbirths registered during the year, 56 males and 41 females, giving a stillbirth-rate of 21.4 per 1,000 births (live and still), compared with 19.3 in 1957.

From detailed records compiled of the 98 stillbirths notified during the year, the following summary has been made :

Confined at		Condition of foetus		Duration of pregnancy in weeks															
Home	Hospital	Macerated	Not Macerated	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43
23	75	48	50	5	2	6	—	8	1	6	8	9	8	10	1	17	5	11	1

Confined at		Condition of foetus		Parity of Mother										
Home	Hospital	Macerated	Not Macerated	1	2	3	4	5	6	7	8	9	10-15	16
23	75	48	50	36	20	13	13	5	4	2	2	2	—	1

The causes of the stillbirths were :

Ante partum hæmorrhage	..	.	..	5
Abnormal presentation	..	..	..	7
Toxæmia of pregnancy	..	..	..	7
Prolapsed cord	..	..	..	2
Cord around neck	..	..	..	6
Maternal disease	..	..	..	2
Malformation of fœtus	..	..	..	23
Prematurity	..	..	..	8
Rh. negative with antibodies	..	..	..	4
Difficult delivery	..	..	..	9
Placental abnormality	..	..	..	7
Not known..	..	..	..	18
Total				98

From an analysis of the stillbirths, the following observations are made :

- (1) In the 23 domiciliary confinements which resulted in a stillbirth, the midwife was in sole charge of the pregnancy and confinement in seven of the cases. In 13 cases, both midwife and doctor had been engaged, in one case no doctor or midwife had been engaged and in two cases the patient was booked for hospital delivery and a stillbirth was born at home before the arrival of the ambulance. The doctor was called in in emergency in eight cases.

23 cases during the year is an unusually large number for domiciliary cases and all have been investigated thoroughly. Only in nine cases was there no apparent cause for the stillbirth. The causes for the remaining 14 cases were :

Malformation of fœtus	..	..	..	4
Prematurity	..	..	..	4
Difficult or precipitate delivery	..	..	..	3
Cord around neck	..	..	..	2
Abnormal presentation	..	..	..	1
Total				14

- (2) Concerning the 75 stillbirths reported from hospital, 24 were admitted as emergencies and were not booked for hospital confinement and blood transfusions were given by the "Flying Squad" to two patients prior to admission to hospital.
- (3) The duration of pregnancy was 40 weeks in only 17 of the cases and it will be seen that an unusually large number of the pregnancies terminated prematurely.

- (4) Again, the largest group at risk are the women pregnant for the first time with the pregnancy ending in a stillbirth in 36 women. An unusually high figure is that of 20 women having their second pregnancy ending in stillbirth. Women having their second pregnancy are, in general, the women least likely to have stillbirths.
- (5) As will be noted from the list of causes, there were 23 cases of malformation of the foetus, these being :

Hydrocephaly	..	..	6
Microcephaly..	..	..	1
Anencephaly ..	..	..	13
Spina bifida ..	..	..	1
Exomphalos ..	..	..	1
Multiple defects	..	..	1
<hr/>			
Total	..	..	23
<hr/>			

It is not possible to offer any explanation for this preponderance of defects of the central nervous system.

- (6) Amongst the cases, two are particularly worthy of note. One patient has had five pregnancies since 1949, all ending in a still-born infant despite every care and attention and one patient having her 16th pregnancy, six of which have ended in a stillbirth. This patient is Rh. Negative with antibodies and only one of the last six pregnancies has produced a live child which was given a replacement transfusion.

Infant Mortality Rate. (Registrar General's Figures):

Number of deaths in infants under one year	..	113
Corrected number of births	.. ..	4,440
Infant death-rate	.. ..	25.45

From our local figures, the following summary of 111 infant deaths has been made (the remaining two deaths being transferred in to our area having occurred elsewhere, and of which we have no detailed record) :

Onset of Illness		Place of Death		Parity of Mother													
Home	Hospi- tal	Home	Hospi- tal	1	2	3	4	5	6	7	8	9	10	11	12	Unknown	
55	56	26	85	35	21	18	15	6	6	4	1	—	2	—	1	2	

Onset of Illness		Place of Death		Duration of Illness													
Home	Hos- pital	Home	Hos- pital	Under 1 day	1 - 7 days	8 - 14 days	15 - 28 days	29 days—	2 mths.—	3 mths.—	4 mths.—	5 mths.—	6 mths.—	7 mths.—	8 mths.—	9 mths.—	10 mths.—
55	56	26	85	52	36	11	7	1	2	—	1	—	1	—	—	—	—

From the above analyses the following observations are made :

- (1) The initial illness occurred almost equally in hospital and in the home, but nearly half the children taken ill at home were transferred to hospital.
- (2) The duration of illness was under 24 hours in 52 of the deaths and under one week in an additional 36 cases, making 79.3% of the total deaths.
- (3) The infant death was associated with the first pregnancy in 35 mothers.

From an analysis of the cause of death, according to our local records and not for comparison with the Registrar-General's figures, the following observations are made :

- (1) Following the lowest recorded infant death-rate of 17.6 for 1957 in Leicester, it is disturbing that the rate for 1958 has shot up to 25.45 but this pattern of events has occurred in places other than Leicester in recent years.
- (2) The main reason for the increase in the number of infant deaths was prematurity. (Details of premature infants will be found on page 116 of the report.)

Prematurity was only given as the primary cause of death in 22 cases but in many of the others, particularly atelectasis, asphyxia neonatorum and pneumonia (all forms) there was associated prematurity, and in all there were 51 premature infants who died during the year as compared with 24 premature infants in 1957.

- (3) Apart from the increased figures due to prematurity, pneumonia, atelectasis, and asphyxia neonatorum, there was an increase from four deaths in 1957 to 11 deaths in 1958, due to congenital heart disease.

- (4) Congenital malformations accounted for 10 deaths of which seven were due to spina bifida and two to anencephaly.
- (5) There were four deaths in 1958 due to haemolytic disease of the newborn as compared to nil in 1957.
- (6) Violence and accident accounted for four deaths ; one infant who died of inhalation of vomit ; one infant who was suffocated in bed ; and two infants who had been live born but who were found dead in a house and in a dustbin, respectively.
- (7) Lastly, of the 111 deaths, 65 occurred before the end of the first week and 81 before the end of the first month.

Neo-natal Mortality Rate. (Registrar-General's figures)

The Neo-natal Mortality Rate is calculated as :

$$\frac{\text{Number of deaths under 28 days} \times 1,000}{\text{Total live births}} = \frac{82 \times 1,000}{4,440} \\ = 18.5 \text{ per } 1,000$$

Perinatal Mortality Rate

The Perinatal Mortality rate is calculated as :

$$\frac{(\text{All deaths under 7 days} + \text{all Stillbirths}) \times 1,000}{\text{Total births (living and stillborn)}} = \frac{(65 + 97) \times 1,000}{(4,440 + 97)} \\ = 35.7 \text{ per } 1,000$$

In the 1957 Report, the above rate was calculated for the first 28 days of life, but the Registrar-General has decreed for the sake of uniformity that it be calculated for the first seven days of life. Thus, for comparison with the rate for this year, the rate for 1957 would have been 30.6 per 1,000.

The increase in this rate once again reflects the influence in 1958 of the increased number of women who went into labour prematurely and produced either stillbirths or very small premature live births.

Perinatal Mortality Survey

The Perinatal Mortality Survey, which was sponsored by the National Birthday Trust Fund, lasted throughout March, April and May, 1958.

The form for each case in the survey consisted of 68 questions with sub-sections and entailed considerable extra work for all midwives in the city. The senior Medical Officer for Maternity and Child Welfare

was responsible for co-ordinating the survey and checking all births during the period March 3rd to March 9th inclusive and all stillbirths and neo-natal deaths for March, April and May for the City of Leicester.

The number of cases in the survey for the City of Leicester was ; 52 stillbirths, 143 live births, 35 neo-natal deaths. The conduct of the survey was made much easier than it could have been by the admirable co-operation given by the Hospitals, Nursing Homes, Midwives and the Leicester County Council Health Department.

It is hoped, that when all the reports for England and Wales have been analysed and studied, information may become apparent to decrease the wastage of life in the perinatal period.

Maternal Mortality

Number of deaths during the year	..	..	1	
From Puerperal Sepsis	..	..	-
From other accidents and diseases of pregnancy and parturition	..	..	1	
Total	..	..	1	
			1958	1957
Rate per 1,000 live and stillbirths	..	..	0.22	0.44
Puerperal Sepsis Rate	..	..	-	-
Figures for England and Wales :				
Maternal Mortality Rate	..	..	0.43	0.47

This maternal death occurred in November, 1957, but was not registered until 1958 so that there were no actual maternal deaths during the 1958 calendar year.

The death was due to vagal inhibition during the production of an abortion. There was insufficient evidence to show how the abortion was produced and the Coroner recorded an open verdict.

TABLE 7. City of Leicester

INFANT MORTALITY DURING THE YEAR 1958

Net Deaths from stated Causes at various Ages under 1 year of Age
(LOCAL FIGURES)

CAUSE OF DEATH	Under 1 Wk.	1 Week	2 Weeks	3 to 4 Weeks	Total under 1 Month	1 to 3 Mths.	4 to 6 Mths.	7 to 9 Mths.	10 to 12 Mths.	Total Deaths under 1 Year
All Causes Certified ..	65	5	5	6	81	15	8	6	1	111
Congenital Malformations.	4	—	—	2	6	3	1	1	—	11
Birth Injuries	3	—	—	—	3	—	—	—	—	3
Atelectasis	12	—	—	—	12	—	—	—	—	12
Premature Births	22	—	—	—	22	—	—	—	—	22
Diarrhœa, etc.	—	—	—	—	—	—	2	—	—	2
Convulsions	—	—	—	—	—	—	—	1	—	1
Asphyxia Neonatorum ..	9	—	—	—	9	—	—	—	—	9
Hæmolytic Disease of the Newborn	2	1	1	—	4	—	—	—	—	4
Pemphigus Neonatorum ..	—	—	—	—	—	—	—	—	—	—
Hæmorrhagic Disease of the Newborn	1	—	—	—	1	—	—	—	—	1
Tuberculous Meningitis ..	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis ..	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—
Meningitis (<i>Not Tuberculous</i>)	1	—	—	—	1	—	—	—	—	1
Bronchitis	—	—	—	—	—	2	—	—	—	2
Pneumonia (all forms) ..	6	2	1	1	10	6	3	3	—	22
Syphilis	—	—	—	—	—	—	—	—	—	—
Intussusception & Intestinal Obstruction	—	—	—	—	—	—	—	—	—	—
Congenital Heart Disease ..	3	2	1	2	8	—	1	1	1	11
Whooping Cough	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—
Cerebro-spinal Fever	—	—	—	—	—	—	—	—	—	—
Ant. Poliomyelitis	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—
Other Infective Diseases ..	—	—	1	1	2	1	—	—	—	3
Malignant Neoplasms	—	—	—	—	—	—	—	—	—	—
Violence and Accident	2	—	—	—	2	2	—	—	—	4
Other Causes	—	—	1	—	1	1	1	—	—	3

Registrar-General's figures :

Net Births in { legitimate, 4,119
the Year { illegitimate, 321

Net Deaths in { legitimate infants, 104
the Year of { illegitimate infants, 9

NATIONAL HEALTH SERVICE ACT, SECTION 22

CARE OF MOTHERS AND YOUNG CHILDREN

Health Visiting

(Corresponding figures for the previous year are shown in brackets)

Number of first visits to children under one year old ..	4,543	(4,446)
„ „ revisits to children under one year old ..	21,111	(21,732)
„ „ visits to children one to five years old ..	30,998	(35,386)
„ „ first visits to ante-natal cases ..	1,610	(1,555)
„ „ other visits to ante-natal cases ..	926	(1,020)
„ „ visits to tuberculous patients ..	4,021	(5,194)
„ „ visits re Mantoux testing ..	96	(288)
„ „ visits concerning infant deaths and stillbirths	56	(42)
„ „ visits concerning after-care ..	304	(196)
„ „ visits to diabetes patients ..	1,767	(1,547)
„ „ visits concerning applications for convalescent home accommodation ..	196	(149)
„ „ other visits (no access) ..	9,106	(10,423)
„ „ other visits (not classified) ..	4,089	(4,511)
Totals ..	<u>78,823</u>	<u>(86,489)</u>

Attendances of Health Visitors at Clinic and other Sessions :

Child Welfare Centres ..	2,568
Ante-Natal Clinics ..	653
Birth Control Clinics ..	209
School Sessions (including Minor Ailments, Scabies Clinics, B.C.G. Sessions and Medical Inspections)	4,142
Diphtheria Immunisation and Vaccination Clinics ..	68
Chest Clinic ..	250
Hospital Sessions ..	385
Screening Tests ..	674
Others (including Audiology Clinic) ..	454
Total ..	<u>9,403</u>

It was not possible to maintain the establishment figure of 36 health visitors employed by the Health Department entirely throughout the year but the deficiency was for a very short period and was compensated for by equivalent periods when the figure was exceeded. In addition, there are several of the School Health Service staff who undertake combined duties, but this Service was considerably under establishment throughout the year with the result that the health visitors employed by the Health Department had to make good the deficiency.

The figures show a decrease of 7,666 in the grand total of visits paid as compared with 1957, but this is due to an increase in the selective visiting as compared with routine visits ; the considerable time taken in travelling, particularly to the new estates on the periphery of the city, and the time taken to make several visits on these new estates which cover a considerable area and are devoid of public transport.

Concerning these statistics :

- (1) The visits to tuberculous patients again show a considerable decrease as is to be expected in view of the gradual conquest of this disease.
- (2) The number of visits concerning after-care, to diabetic patients and to applicants for convalescent home accommodation show an increase and are further indications of the change in character of the work and duties of the health visitor. She is ever increasingly becoming the family adviser rather than just the adviser to mothers and young children.
- (3) The number of "no access" visits have decreased slightly compared with 1957 but despite all efforts these remain a considerable loss of time to the health visitors concerned.
- (4) Since March, 1958, co-operation and exchange of information has improved considerably between the Health Visiting Staff, the Home Nursing Staff and the Home Help Service, largely as a result of regular monthly meetings between the Superintendent Health Visitor, the Senior Superintendent of Home Nursing, and the Home Help Organiser.
- (5) Members of the Health Visiting Staff have attended regularly at case conferences called by the Medical Officer of Health as co-ordinating officer for the City of Leicester in accordance with the terms of the joint circular of the Ministries of Health and Education and of the Home Office. They have also attended case conferences called by the Children's Officer. The Superintendent Health Visitor has also attended conferences with the Deputy

Medical Officer of Health, the Home Help Organiser, and the Senior Medical Officer for Maternity and Child Welfare for the prevention of break-up of families.

- (6) From the 1st April, 1957, to 17th May, 1958, the Health Visitors and Public Health Inspectors co-operated with the Central Public Health Laboratory in obtaining stool specimens from children as part of the Poliomyelitis Survey. The specimens were examined at the Central Public Health Laboratory for the presence of any Poliomyelitis virus.

260 children were sampled during this period, 253 children were negative, six children provided cultures of the Type I virus and one child of the Type III virus. Five out of the seven positives were found during July, August and September, 1957. The full result of the National Survey, of which this survey in Leicester was but a part, is still awaited.

Deafness in the Pre-School Child

Due to the increasing demand for the service provided in the Audiology Clinic, it was found necessary during 1958 to hold two clinic sessions weekly.

The following is a summary of the work during the year under review :

Number of clinic sessions held (for ascertainment and for training)	..	..	..	..	100
Number of new children referred (including 8 from other Local Authorities)	..	..	..	..	19
Number of children who attended during 1958	..				38
Number of attendances made by the children	..				460
Average attendances of children at each clinic	..				4.6
Number on register January 1st, 1958	..				19
Number on register December 31st, 1958	..				13

Source of recommendation of New Cases :

Medical Staff of Health Departments	..	..	8
Ear, nose and throat Surgeons	..	..	1
Pædiatricians	..	..	2
General Practitioners	..	..	1
School Medical Service	..	..	3
Failed Screening Tests	..	..	4
			—
Total	..	..	19
			—

25 children ceased attending the clinic during 1958 for the following reasons :

Number of children who, after adequate investigation, have been shown to have hearing over the whole range of speech frequencies	13
Number of children who have gone to a School for the Deaf or Partially Deaf	9
Number of children unsuitable for training due to multiple handicaps	1
Number of children who died during 1958	1
Number of children whose parents refused to continue training	1
	<hr/>
	25
	<hr/>

The parents who refused to continue training, despite the fact that their child was severely deaf, had been referred by another Local Authority.

Screening Tests

The following are the details of the 1,840 routine tests carried out during the year, with the corresponding details for previous years and the total of tests :

No. of Children tested			Results of Screening Tests, 1958		
Previous years	1958	Total	Failed 1st Test	Failed 2nd Test	Failed 3rd Test
5,494	1,840	7,334	68	8	4

The details given above include six children whose investigations were incomplete at the end of 1957. One child who failed his second screening test in 1958 moved from the district and the final diagnosis is not known in his case. Of the remaining seven children who failed their second screening test, three were found to have normal hearing and four have been attending at the Audiology Clinic and were found to have varying degrees of deafness.

The ages of the children tested were as follows :

Under 1 year	1,340
12—15 months	239
15—18 months	81
18 months—2 years	65
2—3 years	72
3—4 years	32
4—5 years	11
	<hr/>
Total	1,840
	<hr/>

A number of the Health Visitors who were specially trained to perform screening tests of hearing left the Department during the year and arrangements have been made to train further Health Visitors in this work during 1959.

This loss of specially trained staff is responsible for the smaller number of screening tests having been done during 1958 as compared with 1957.

During the year also, one of the three specially trained Health Visitors attached to the Audiology Clinic left the Department thus leaving only two specially trained Health Visitors to assist with guidance and training of parents and children at the clinic. Arrangements are also in hand to train two further Health Visitors during 1959 to make good this deficiency.

Due to the delayed appearance of the Government-provided Transistor Hearing Aids, the Health Committee agreed to purchase three Commercial Transistor Hearing Aids and the Education Department one Commercial Transistor Hearing Aid during 1958. These aids were of inestimable benefit to the very small children for whom they were provided. The Government hearing aids eventually were provided towards the end of 1958.

Following her retirement, Dr. E. B. B. Humphreys continued in charge of the clinic until the 24th April, when the Senior Medical Officer for Maternity and Child Welfare took complete charge of the clinic.

We are extremely grateful to Dr. Humphreys for this extra effort on her part to ensure the adequate continuance of the work which she had so ably started.

The clinic is extremely fortunate in the sustained interest of Professor Sir Alexander and Lady Ewing of Manchester on whose teaching and research the clinic was founded.

The Audiology Clinic moved from Crescent Street to New Walk Clinic Centre in October, 1958.

Handicapped Children

1958 was the first full year in which the Register of Handicapped Children under school age was kept in the Maternity and Child Welfare Department. The Health Visiting cards for these children are checked monthly by the Senior Medical Officer for Maternity and Child Welfare and unless the handicap does not warrant it, a home visit is paid every

month by the Health Visitor. The scheme has worked extremely well and has proved of considerable benefit, particularly for reference purposes to the Senior School Medical Officer who has been enabled to know of handicapped children well before the age of two years as a result of this scheme. This is extremely valuable where special educational facilities would be required.

The statistics for 1958 are appended below :

Total of registered handicapped children in January, 1958	132
New registrations during 1958	92
Children attaining the age of five years during 1958 . . .	42
Children who died during 1958	8
Children who moved from the City during 1958 .. .	11
Children reviewed and considered no longer handicapped . .	6
<hr/>	
Total of registered handicapped children in December, 1958	157
<hr/>	

Of the 224 children on the register during the year, the handicaps were as follow :

Blind and partially sighted	18
Deaf and partially deaf	15
Orthopaedic defects	27
Mentally retarded :	
Mongols	30
Others	33
Epilepsy	13
Cardiac abnormalities	23
Congenital deformities	21
Cerebral palsy or spastic	23
Urogenital abnormalities	4
Diabetes	1
Others	16
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Total	224
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Mobile Clinic

This clinic, now in use for four years, continues to provide convenient and hygienic conditions of work for the doctor and health visitors in outlying areas of the city where such facilities would otherwise not be available.

At the end of 1958, the clinic was being used for six sessions per week as compared with nine sessions per week in 1957. This was due to the closure of Goodwood Ante-Natal Clinic and to the fact that it was no longer required for the ante-natal clinic and infant welfare clinics at Humberstone Village.

Ante-natal Clinics

Clinic	No. of Sessions	ATTENDANCES			
		First Visits	Re-Visits	Total	Avg. per Session
Cort Crescent	49	95	411	506	10
Crescent Street, a.m.† ..	37	89	299	388	10
p.m.‡ ..	37	107	341	448	12
Causeway Lane	53	122	370	492	9
Belgrave Hall	52	231	901	1,132	22
Newby Street	51	232	909	1,141	22
Braunstone Avenue§ ..	16	27	73	100	6
Aikman Avenue*	49	96	357	453	9
Southfields Drive	49	124	451	575	12
Stocking Farm*	48	116	600	716	15
Humberstone Village ..	53	51	248	299	6
Goodwood*†	28	23	37	60	2
Valence Road§	33	64	189	253	8
New Walk, a.m.†	12	18	91	109	9
p.m.‡ ..	12	28	120	148	12
Totals	579	1,423	5,397	6,820	11

*Mobile Clinic

†Closed 10th July, 1958.

‡Transferred to New Walk, October, 1958.

§Transferred to Valence Road, May, 1958.

As will be seen from the above Table, many changes occurred during the year in ante-natal clinics. As a result of the Valence Road Health Centre being opened in May, 1958, the ante-natal clinic previously held at Braunstone Avenue was transferred to Valence Road. Similarly, new premises were opened at New Walk in October, 1958, and the clinics previously held at Crescent Street were transferred.

Due to the ever-decreasing attendances at the ante-natal clinic at Goodwood Road, this clinic was closed in July, 1958, thus leaving ten ante-natal clinics in December, 1958.

Following the opening of the new Church Hall at Humberstone Village, the ante-natal clinic has been held in these new premises since December, 1958 which do not require to be supplemented by the Mobile Clinic.

The volume of the work has decreased slightly during 1958, but the demand in the more established clinics such as Belgrave Hall and Newby Street has increased.

During October and November, 1958, six health visitors were given in-service training in Mothercraft and Relaxation Classes at the Leicester General Hospital and the Leicester Royal Infirmary Maternity Hospital, Causeway Lane. We are extremely grateful for the co-operation and facilities provided by these two hospitals which will result in the first Local Authority Mothercraft Classes in Leicester commencing in January, 1959, at New Walk and Valence Road Centres.

Post-natal Clinic

There is one central clinic—with a weekly session—for those patients attended by a midwife only.

The response during this fourth year of its existence has shown appreciable increase over 1957. Patients come by appointment and the midwife present at the confinement is encouraged to attend if possible.

Number of sessions	..	..	..	48
First visits of patients	..	..	..	116
Revisits of patients	..	..	..	43

Premature Infants

Circular 20/44 of the Ministry of Health, dated 22nd March, 1944

In the Table, there are 232 infants who were born in hospital, 95 infants who were born at home and 17 infants who were born in a private nursing home, making a total of 344 births in all.

Of the 69 premature infants born at home and remaining at home, 67 survived to the 28th day. This survival rate of premature infants born at home can only be described as excellent and is a tribute to the care and skill provided by the midwives.

The special equipment, collectively known as the "Sorrento" outfit, was used only on six occasions at home.

Of the 26 premature infants born at home and transferred to hospital, 21 survived to the 28th day and three died within 24 hours of birth. These figures are a credit to the hospitals concerned as it is only those babies whose condition is causing most concern who are transferred from home to the hospitals.

PREMATURITY

Number of premature live births notified (as adjusted by transferred notifications):

(a) In Hospital ..	232.	(b) At Home ..	95.
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(c) In Private Nursing Homes	..	17.	Total	..	344
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Number of premature still-births notified (as adjusted by transferred notifications):

Persons notified (as adjusted by transferred notifications):	
(a) In Hospital	(b) At Home
49.	11.

(c) In Private Nursing Homes ..	-	Total ..	60
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WEIGHT AT BIRTH	PREMATURE LIVE BIRTHS															PREMATURE STILL-BIRTHS		
	Born in Hospital			Born at home and nursed entirely there			Born at home and transferred to Hospital on or before 28th day			Born in Nursing Home and nursed entirely there			Born in Nursing Home and transferred to Hospital on or before 28th day			Born in Hos- pital	Born at Home	Born in Nurs- ing Home
	Total	Died within 24 hrs. of birth	Sur- vived 28 days	Total	Died within 24 hrs. of birth	Sur- vived 28 days	Total	Died within 24 hrs. of birth	Sur- vived 28 days	Total	Died within 24 hrs. of birth	Sur- vived 28 days	Total	Died within 24 hrs. of birth	Sur- vived 28 days			
(a) 3 lb. 4 oz. or less (1,500 gm. or less)	29	14	11	2	1	1	6	-	5	-	-	1	-	-	26	5	-	
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500—2,000 gm.)	47	8	35	6	-	5	8	2	5	1	-	1	-	-	9	3	-	
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000—2,250 gm.)	53	2	46	4	-	4	4	-	4	3	-	3	-	-	7	1	-	
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250—2,500 gm.)	103	1	102	57	-	57	8	1	7	10	-	10	-	2	7	2	-	
TOTALS ..	232	25	194	69	1	67	26	3	21	14	-	14	-	2	49	11	-	

It is noteworthy that of the 14 premature infants who remained in a nursing home, all survived to their 28th day.

Of the 232 premature infants born in hospital, 194 survived to the 28th day. Of the 38 who did not survive, 25 died within 24 hours of birth.

Thus it will be seen that in 1958 there were 344 premature live births and 60 premature stillbirths, compared with 292 premature live births and 44 premature stillbirths in 1957. The percentage of premature births who died in 1957 (24 out of 292) was 8% and in 1958 was 51 out of 344 which is 14.5%.

Therefore it is seen that not only was there an increase in the number of premature births born in 1958 as compared to 1957 but a lesser proportion survived. Many infants had little or no chance of survival, particularly when it is noted that 24 infants weighed 3 lb. 4 oz. or less at birth and nine of these weighed between 1 lb. 4 oz. and 1 lb. 10 oz.

Ophthalmia Neonatorum

There were four cases notified during the year. Two were referred to the County of Leicester and two responded satisfactorily to treatment.

Birth Control Clinic

There are two weekly sessions devoted to this work, one at a central clinic and one on an outlying estate.

The following figures refer to the work done at both clinics during the year 1958 :

	<i>City</i>	<i>County</i>	<i>Total</i>
Number of patients who sought advice ..	141	50	191
Number of patients who were accepted for advice	140	50	190
Number of patients who were refused advice	1	—	1

Concerning the 190 women accepted for advice, the following are the medical reasons for which the advice was given :

Husband :	<i>City</i>	<i>County</i>	<i>Total</i>
Active Tuberculosis	2	—	2
Other diseases	1	1	2
Children :			
Congenital defect	—	3	3

Patient :			<i>City</i>	<i>County</i>	<i>Total</i>
Nervous debility	6	3	9		
General debility	51	18	69		
Pulmonary Tuberculosis	5	2	7		
Heart disease	3	2	5		
Kidney trouble	2	—	2		
Toxæmia of pregnancy	1	2	3		
Obstetric complications	15	3	18		
Gynæcological conditions	1	—	1		
Various other conditions	53	16	69		

Cases in which advice was refused

Advice was refused to one city patient as there was no medical reason for contraception.

Child Welfare Centres

(Corresponding figures for the previous year in brackets)

Number of Child Welfare Centres	26	(26)
Number of Medical Weekly Sessions	26	(26)
Number of Sessions held ..	1,297	(1,295)
Total attendances of Mothers	52,520	(54,121)

Total attendances of Children :

Under one year old ..	45,897	} 62,728	(46,017)	} (63,452)
Over one year old ..	16,831			

First visits of Children :

Under one year old ..	3,775	} 4,308	(3,723)	} (4,137)
Over one year old ..	533			

Number of sessions at which a doctor was present ..	1,284	(1,291)
Number of children seen by a doctor	21,294	(21,774)

The number of Child Welfare Clinic sessions was maintained at 26 per week throughout the year but there were many changes of premises.

The clinic at Braunstone Avenue ceased at the end of April and was replaced in May by a clinic at Valence Road Health Centre ; the clinic at Crescent Street closed in October and was replaced by the clinic at New Walk Clinic Centre; due to ever-diminishing attendances, largely caused by demolition and rehousing in the area, the clinic at South Church Gate closed in April. A new clinic was opened at Knighton Parish Hall in April and provided a much-needed centre to serve the Knighton area in the south of the city.

During the year, the volume of work in these centres decreased very slightly compared with 1957 but a welcome feature was the increase of 119 children over one year old who attended the clinic for the first time.

Conversely, it is a little disappointing that the total attendances of children over one year old decreased in comparison with 1957.

The average number of children seen by a doctor at each session was 16.6.

Regular teaching in health education in the form of talks given by health visitors and health visitor students continued during the year. In addition, Mr. E. W. Harris, the Health Education Assistant, showed films at various centres and gave talks either on his own or in conjunction with the health visitors in charge of the clinic.

Once again, it is our great pleasure to record the great debt we owe to the large number of voluntary workers at these centres, including members of the Women's Voluntary Service, who have continued to assume the responsibility for the distribution of Welfare Foods. The contribution of these voluntary workers to the smooth running of these clinics is invaluable.

Welfare Foods

The distribution of welfare foods has continued during the year under review. At the beginning of 1958 the centres for distribution were Crescent Street Clinic premises, 140 Wellington Street and the Women's Voluntary Service offices at Jubilee Buildings, Charles Street. During 1958, the centres at Wellington Street and Jubilee Buildings ceased to function and with the opening of New Walk Clinic Centre in October, the welfare foods distribution was centred there. In addition, welfare foods are distributed at all the Child Welfare Centres in the city. The welfare foods centre at 96 New Walk is open every day of the week including Saturday mornings, but the Child Welfare Centres are only open for the distribution of welfare foods at the session when the Child Welfare Clinic is held.

Full-time staff of the Health Department is employed at 96 New Walk but the great majority of the work is carried out by members of the Women's Voluntary Service and other voluntary workers.

During the year the following types of welfare foods were distributed from the various centres :

Main Distribution				
	Centres	Clinics	Total	
Orange Juice (bottles) ..	41,066	93,609	134,675	
National Dried Milk (tins) ..	31,133	40,828	71,961	
Cod Liver Oil (bottles) ..	4,665	12,959	17,624	
Vitamin Tablets (packets) ..	5,933	8,629	14,562	
			<hr/>	
			238,822 items	
			<hr/>	

Promotion of Cleanliness and Good Habits and the Elimination of Verminous Conditions. (Circular 2,831 of the Ministry of Health, dated July, 1943)

Ascertainment

The method and classification, as previously described, remain unchanged.

The number of children under five years of age known to the Department to be persistently verminous during the year under review was six, and as previously, they belonged to families where the mother was not unduly concerned about the presence of head lice.

It is fair to say that this is an underestimate of the incidence of verminous conditions which are often only made known when an emergency requires intensive and prolonged help to be provided for such a family.

Method of Cleansing

The cleansing of the young children is sometimes undertaken at home but more usually at the Cleansing Centre. This centre was at Slater Street until April and the premises were then demolished and replaced by a centre at Elbow Lane. The home premises are dealt with by the staff of the Public Health Inspection Department.

Treatment at Minor Ailments Clinics

Where necessary, children under school age are referred for the treatment of minor ailments to one of the many Minor Ailments Clinics in the city administered and staffed by the School Health Service.

Artificial Sunlight

The number of children referred to the clinic was 45, as against 83 for the previous year.

The number of children who completed treatment was as follows :

	<u>Good Results</u>		<u>Fair or unchanged</u>		Total
	Boys	Girls	Boys	Girls	
Infants :					
Respiratory Catarrh ..	5	6	2	1	14
Anorexia	2	1	1	—	4
Rickets	4	1	—	—	5
Various	2	4	—	—	6
	—	—	—	—	—
Totals ..	13	12	3	1	29
	—	—	—	—	—

Other Clinics

There were 35 children under five years of age admitted to the Ear, Nose and Throat Clinic, 108 to the Eye Clinic, 224 to the Skin and Minor Ailments Clinic, 92 to the Orthopaedic Clinic and none to the Rheumatism Clinic.

Day Nurseries

The details of the provision and attendances at each nursery are given as follows :

<i>Day Nursery</i>		<i>Places</i>	<i>Attendances</i>	<i>Daily Average</i>
St. Martin's ..	..	60	12,452	51.03
Glen Street ..	..	60	11,389	46.68
Fosse Road ..	..	45	11,115	45.55
Fairway ..	..	40	8,821	36.15
New Walk ..	..	35	7,524	30.83
College Street ..	..	45	11,341	46.48
Belgrave House ..	..	60	9,182	37.63
Bedford Street ..	..	50	12,929	52.98
Sparkenhoe Street ..	..	50	11,899	48.76
Frank Street ..	..	50	11,545	47.31
Number of children on the register at end of year ..				554
Number of approved places ..				495
Average attendance in 1958 ..				443.4

Until September it had been possible to maintain the service with no actual waiting list for vacancies, but in the last quarter of the year the demand for vacancies so far exceeded the supply that there was an actual waiting list varying from 30 to 40 children. Every effort is made to ensure that the period spent on the waiting list is as short as possible. The presence of an actual waiting list is partly the result of the closure of the industrial day nurseries in the town.

Considerable absences were caused by the measles epidemic which was at its peak from January to April. There were only two cases of dysentery in the Day Nurseries, both being in the same nursery, but controlling this very minor outbreak did not entail the closure of the nursery concerned.

Nurseries and Child Minders Regulation Act, 1948

Of the industrial nurseries registered in 1948, the remaining two in Leicester both closed during August and as a result placed an additional strain on Corporation Day Nurseries.

Until their closure they were under the supervision of the Supervisory Matron of Day Nurseries.

During the year two persons applied for registration as daily minders and were approved and two daily minders applied for increase in the number of children they were permitted to look after and were approved.

Nine registrations were cancelled during the year. At the end of the year 18 persons were registered as daily minders receiving the maximum of 93 children. The registered daily minders are supervised by the Superintendent Health Visitor together with the appropriate district Health Visitor.

The Care of Illegitimate Children

Circular 2866 of the Ministry of Health, dated October, 1943

In accordance with the provisions of the above Circular, a scheme has been in operation since 1st April, 1944, in collaboration with the Diocesan Moral Welfare Association.

Full details were given in the 1944 report.

Analysis of the work done during 1958 is as follows :

Total number of cases referred	182
Brought forward from 1957	47
	— 229
Matrimonial and family problems dealt with ..	24
Cases of older children	50
	— 74
	—
Total cases	303
	—

Sources of reference (new cases only) :

Hospital Almoners	12
Health Visitors and Clinics	51
Officials N.A.B., Employment Exchanges, etc. ..	2
National Council for the Unmarried Mother and her Child	16
Voluntary Agencies and individual Social Workers ..	33
Doctors, Employers, Friends	44
Personal application	4
Clergy, Church Workers	20
	—
	182
	—

Ways in which applicants have been helped :

	1957	1958
*By admission to Voluntary Homes or Hostels ..	15	31
By provision of clothing, cots and prams ..	11	22
By finding lodgings for mothers	2	6
By finding foster homes for babies	—	15
By finding work for mothers	—	2
By placing children in voluntary homes and nurseries	3	8
By helping mothers to obtain affiliation orders ..	6	7
By helping to arrange private agreements	2	3
By obtaining financial help through voluntary societies	1	2
By advice and guidance on questions of adoption, affiliation, matrimonial difficulties and personal problems	7	86
	—	—
Totals	47	182
	—	—

*The fees paid to the Homes and Hostels were made up as follows :

Paid for by the City Health Department and mother's insurance	4
Paid for by the City Health Department, parents and mother's insurance	1
Paid for by the City Health Department and parents ..	3
Paid for by the City Health Department and putative father and national insurance	1
Paid for by the City Health Department, mother's insurance and mother's savings	2
Paid for by parents and mother's insurance	4
Paid for by mother's savings and insurance	4
Paid for by putative father and mother's insurance ..	10
Other local authorities	1
Paid for by putative father and parents	1
	—
Total	31
	—

Position with regard to children at the end of year :

	1957	1958
Living with unmarried mother in her parent's home ..	6	33
Living in lodgings	9	21
Living in mother's own home	3	3
Living with mother married to putative father ..	4	7
Living with mother married to another man ..	—	1
Living with mother in a residential post	—	—
Living with parents who are cohabiting	1	3

Mother responsible for and has access to child :	1957	1958
Living with foster parents	—	7
Living in private residential nursery	—	—
Living in voluntary children's home	3	2
Adopted or placed for adoption	9	26
Advised and helped before passing on :		
Mother and child removed to another area	—	10
Mother removed before birth of child	2	2
Case referred to another agency	5	—
Died	—	1
Miscarriages and abortions	—	4
Cases still in hand :		
In care of Local Authority with or without mother	4	8
In voluntary home or hostel with mother	—	2
As yet unborn	—	52
Present whereabouts unknown	1	—
Not recorded	—	—
Total	47	182

Adoption of Children (Regulation) Act, 1950

The Leicester Diocesan Moral Welfare Association continues as the Registered Adoption Society for the City and County under the name of the Leicester and Leicestershire Adoption Society.

Details of the work of the Society during 1958 are as follow :

Total number of applications from persons wishing to adopt a child	298
Number of above considered by Case Committee	119
Number of children offered to the Society with a view to adoption	103
Number of children taken into Hostels under the direct control of the Society pending adoption	Nil
Number of children placed by the Society pending adoption in foster homes or hostels not under the direct control of the Society	34
Number of children placed with a view to adoption	82
Number of orders made in respect of children placed by the Society	71
Number of children withdrawn from adopters during probationary period	1
Number of children placed by the Society for adoption and awaiting Orders at the end of the year	40
Number of children in hostels under the control of the Society at the end of the year	Nil
Number of children at the end of the year in foster homes or in hostels in which they have been placed by the Society but which are not under the Society's direct control	Nil

NATIONAL HEALTH SERVICE ACT, SECTION 23 MIDWIFERY

Midwives

During the year 1958, 122 midwives notified their intention to practise. Of these, 28 were municipal midwives, seven were midwives in independent practice in registered nursing homes, and the remaining 87 were practising in maternity hospitals and maternity homes.

THE MUNICIPAL MIDWIFERY SERVICE SUMMARY OF WORK DONE BY MUNICIPAL MIDWIVES

Area	Cases Attended	Gas and Air Administered	Pethidine administered	VISITS		
				Ante-natal	Post-natal	Total
1	318	276	119	2,105	6,399	8,504
2	286	257	103	1,784	6,430	8,214
3	227	206	123	2,261	5,533	7,794
4	160	146	68	1,149	2,758	3,907
5	232	206	163	1,638	5,381	7,019
6	310	256	164	2,001	6,787	8,788
7	253	224	149	1,534	5,250	6,784
Part-time and Relief	34	34	30	132	1,507	1,639
Totals	1,820	1,605	919	12,604	40,045	52,649

Area 1. Aylestone, Eyres Monsell, Southfields, Saffron Lane.

Area 2. Braunstone, Narborough Road, Westcotes.

Area 3. Braunstone Frith, New Parks, Abbey Lane, Belgrave Gate.

Area 4. Humberstone, Catherine Street, Gipsy Lane.

Area 5. Stocking Farm, Mowmacre, Loughborough Road, Belgrave.

Area 6. Northfields, Scraftoft, North Evington, Thurnby Lodge, Goodwood.

Area 7. Central, Crown Hills, Evington, Stoneygate, Clarendon Park, Knighton.

Not only was the establishment of 28 midwives not maintained during 1958, but it was never approached. In December, 1957, the

number of effective full-time midwives was 25 plus one part-time midwife. One midwife in addition to this has been on sick leave throughout the whole of 1957 and resigned in January, 1958. During 1958, four further full-time midwives resigned from the Service and the only additions to the Service were one full-time midwife, two part-time midwives and one part-time maternity nurse who is able to provide very limited service.

Thus, in December, 1958, the effective midwifery staff for the city consisted of 22 full-time midwives, three part-time midwives and one part-time maternity nurse. This position would be made worse in early 1959 as one of the existing full-time midwives, Miss K. M. Macdonald, was appointed in December to become the first Non-medical Supervisor of Midwives for the City of Leicester.

During 1958 the Service was also extremely unfortunate in that three midwives had a long period of absence from duty due either to accident or illness.

In view of all these factors the midwives deserve our unstinted admiration for the fact that more home deliveries were conducted in 1958 as compared to 1957 (an increase of 49 cases). The total number of visits paid in 1958 was 52,649, as compared to 53,268 in 1957.

In view of the severe strain on the Service, it became necessary in September to reorganise some of the areas in order to ease in some degree the burden on the more overworked midwives and the number of domiciliary visits in the post-natal period was reduced.

Midwives and General Practitioner/Obstetricians

The following figures indicate the distribution of the work between the midwives and doctors concerning the 1,805 deliveries attended by midwives in the area during the year :

Deliveries attended by a midwife :

(a) (i) When a doctor was not booked but was present at time of delivery	9
(ii) When a doctor was not booked and was not present at time of delivery	289
(b) (i) When a doctor was booked and was present at time of delivery	246
(ii) When a doctor was booked and was not present at time of delivery	1,261
Total	<hr/> 1,805 <hr/>

Patients confined in Hospitals

The scheme of notification to the Health Department of patients discharged from hospital has continued during the year, and these patients are visited by the midwives until the 14th day and thereafter the cases are handed over to the health visitor for the area.

At times during the year, the hospitals in the city have suffered from an acute shortage of midwives, as has the municipal service. In view of this strain on the hospitals concerned it is laudable that only 1,075 patients delivered in institutions were discharged to the care of domiciliary midwives before the 14th day, of whom 344 were before the 10th day. The corresponding figures for 1957 were 1,336 and 464. Both the hospitals and the municipal midwifery service are extremely conscious of each other's difficulties and work in close harmony.

Flying Squad

Midwives are allowed to act on their own initiative in emergency and the facilities were used four times during the year by a midwife alone and a further five times when the doctor was also present. Of these nine patients, five were given a blood transfusion and five were transferred to hospital.

Breast Milk Bank

Nineteen patients of municipal midwives donated breast milk to the Breast Milk Bank at the Leicester Royal Infirmary Maternity Hospital, Causeway Lane. Only two patients of municipal midwives required milk from the Bank.

NATIONAL HEALTH SERVICE ACT, SECTION 24

Health Visiting and the School Health Service

The co-ordination of these two services, agreed in 1947, continues as each new appointment to the service of a health visitor is made, but it is inevitable, whilst there are members of the School Health Service who are not trained as health visitors, that combined duties cannot be undertaken by this section of the School Health Service staff.

Preventive Mental Health

In-service training was completed for the Health Visitors during 1958 with a Psychologist giving lectures on preventive mental health.

During 1958, six sessions were convened by the Senior Medical Officer for Maternity and Child Welfare between a Psychiatrist from the School Child Guidance Clinic, Assistant Medical Officers of Health and Health Visitors.

Six cases were discussed in all at these sessions and the staff of this department were given advice and guidance by the Psychiatrist in the prevention of mental ill-health in the pre-school children under discussion.

Despite the facilities provided, the demand for these conferences has been less than was hoped for on the part of the Health Visitors and Assistant Medical Officers of Health.

Training School for Health Visitors

From July, 1948, to December, 1958, 263 persons have successfully passed their examination. Of these, 97 were bursary students and have joined the staff for a minimum period of 18 months. Some of them have remained for a longer period and others intend to remain on the permanent staff, whilst some independent students elect to join the staff after the termination of the course. Without the Training School we should not reach and hold our establishment figure (Health Department only) of 36 health visitors.

Miss J. R. Hillier, the Course Tutor for some years, left the Department in August to take up another post. She was replaced by Miss M. E. McClymont who had the unenviable task of taking over in the middle of a Course. Despite this, of the seventeen candidates who sat for the examination in December, all were successful. In addition, a World Health Organisation scholar from India, who was our first student from that country, sat a special examination for overseas students but unfortunately was not successful.

NATIONAL HEALTH SERVICE ACT, SECTION 26

VACCINATION AND IMMUNISATION

Diphtheria Immunisation

Facilities for immunisation against Diphtheria are available at all Child Welfare Centres at their weekly sessions and at Day Nurseries. There is a central clinic which was held at Crescent Street until October and then was replaced by a clinic at New Walk. This clinic is open each Saturday morning and further immunisation sessions are held in Infants' Schools and a certain proportion of children are immunised by their own General Practitioner.

The following Tables show the number of children immunised during the year :

Number of Children immunised against Diphtheria

Under 1 year	1 year	2 years	3 years	4 years	Over 5 years	Total
12	36	5	6	12	14	85

Number of Children re-immunised against Diphtheria

Under 5 years	Over 5 years	Total
23	121	144

Number of Children immunised against Diphtheria and Whooping Cough (combined)

Under 1 year	1 year	2 years	3 years	4 years	Over 5 years	Total
908	2,104	257	78	46	70	3,463

Number of Children re-immunised against Diphtheria and Whooping Cough (combined)

Under 5 years	Over 5 years	Total
230	296	526

Number of Children immunised against Whooping Cough

Under 5 years	Over 5 years	Total
1	7	8

The above figures are less impressive than they might have been due to the fact that in the latter part of the year no Diphtheria and Whooping Cough immunisation sessions were carried out in the schools as the drive for Poliomyelitis Vaccination was in progress.

Vaccination against Smallpox

Under the National Health Service Act, facilities for vaccination were provided at clinic premises at 13 Crescent Street each Saturday morning until October, and these were then replaced by the clinic at New Walk. Requests for vaccination are very few, namely 98 children and 14 adults vaccinated and 5 children and 18 adults re-vaccinated.

Poliomyelitis and Influenza

Immunisation sessions were also held on Saturday mornings at Crescent Street and New Walk, as required, for Influenza immunisation and Poliomyelitis Vaccination for pregnant women.

NATIONAL HEALTH SERVICE ACT, SECTION 28

The Health Visitor is taking on additional duties in the Department. She carries out the work of Tuberculosis Care and After-Care in her own district, and keeps in touch with the Chest Physician at the Chest Clinic.

In the absence of written information concerning discharges of patients from hospital, there is no routine method of follow-up and visits are paid only when a special request is made by the hospital staff. The exception to this arrangement is the after-care of children returning from hospital ; health visitors are detailed to attend the hospital clinics and ward rounds with the Pædiatrician and by these personal visits and by telephone they supply information required by the hospital and inform the health visiting staff of the wishes of the Pædiatrician.

One health visitor has continued to work in conjunction with the Royal Infirmary Diabetic Clinic and during the year paid 1,767 visits to patients suffering from this disease, advising them on their diet and on the many special problems that arose.

The methods of follow-up of maternity patients is detailed under Section 23.

GENERAL

Home Accidents

The department received particulars from the Chief Ambulance Officer of each person conveyed by the Ambulance Service to hospital after an accident. These, together with the home accidents which become known to the health visitors, form the nucleus of this enquiry.

Each case notified was visited by a health visitor who enquired fully into the accident and submitted a report. This visit was also used to advise the family on measures to be taken to prevent further occurrences. This is considered a very important aspect of health education.

In 1958, 241 such accidents were investigated and from these investigations the following statistics are abstracted :

Age				Number
Over 80 years	..	..	..	15
70 — 79	„	..	..	19
60 — 69	„	..	..	18
50 — 59	„	..	..	27
40 — 49	„	..	..	16
30 — 39	„	..	..	11
20 — 29	„	..	..	13
15 — 19	„	..	..	3
10 — 14	„	..	..	13
5 — 9	„	..	..	28
4	„	..	..	9
3	„	..	..	11
2	„	..	..	21
1	„	..	..	29
Under 1	„	..	..	6
Not known	..	..	..	2
Total				241

Circumstances at time of Accident :

Alone	Not alone
128	113

Accident considered to be :

Preventable	Not preventable
167	74

Type of injury :

Fractures	..	..	..	48
Bruises	..	..	..	18
Sprains	..	..	..	6
Dislocations	..	..	..	9
Head injuries	..	..	..	9
Lacerations	..	..	..	85
Burns	..	..	..	17
Scalds	..	..	..	17
Swallowing injurious fluids	..			9
Children taking harmful tablets	..			1
Eating injurious material			..	3
Swallowing coin	..		..	2
Swallowing foreign body			..	4
Dog bites	..	..	..	6
Attacked by cat		..	..	2
Coal gas poisoning	..		..	1
Suffocation	..	..	..	1
Attempted suicide	..		..	1
Gunshot wound		..	..	1
Undiagnosed	..	..	..	1
Total				241

Severity of Injury :

Not severe	..	..	..	161
Severe	..	..	..	73
Fatal	..	..	..	7
Total				241

The fatalities were :

- (a) A boy of seven months who was scalded by pulling a teapot on to himself. Whilst in hospital undergoing treatment he died of convulsions.
- (b) A man of 49 years, who was a chronic invalid, was inadvertently given a teaspoonful of linament instead of medicine and while undergoing treatment in hospital died of pneumonia.
- (c) A man of 64 years, who died of his injuries in hospital after falling down stairs.
- (d) A woman of 70 years, living alone, sustained fractures following a fall and died in hospital.
- (e) A woman of 81 years, who died in hospital from burns.

- (f) A woman of 81 years who slipped and fractured her femur and died in hospital.
- (g) A woman of 86 years, who had two severe falls in one day and died the following day.

Once again, the figures show the accident proneness of the elderly, the old and the very young, and a detailed study of all these accidents demonstrate the following points :

- (1) The considerable dangers of using makeshift appliances to reach heights above shoulder levels.
- (2) The importance of having fireguards, particularly when there are children and infirm adults in the home. A particular source of danger has been the flouncy inflammable petticoats worn by the modern young miss when “toasting” herself too close to an open coal fire.
- (3) The importance of letting sleeping dogs lie and allowing them to have their meals undisturbed. This instruction would have prevented some severe dog bites in young children.
- (4) In almost every case, scalds in children were the result of leaving them unwatched and unattended near kettles, teapots, saucepans, hot cups of beverages and, in two instances, near a bucket of boiling water on washdays. More vigilance in these instances would have prevented severe illness.
- (5) Again accidents have occurred by careless supervision of injurious and poisonous substances which should at all times be in locked cupboards and not accessible to small children. Amongst the materials ingested have been linament, bleach, paraffin, eucalyptus and concentrated detergents.
- (6) Of the 241 accidents investigated, 167, 69.3%, were preventable.

More work will now be done in the prevention of home accidents in the Health Department, as the Department is taking over the main responsibility for this work in 1959.

Registered Nursing Homes

Every effort is made to ascertain any unregistered nursing home.

During 1958 two nursing homes surrendered their registration, leaving eight registered nursing homes in the city.

During the year one nursing home applied for exemption from registration as a non-profit making establishment and this was granted.

Two new applications were received for registration and following investigation they were not granted by the Health Committee.

The Medical Inspector of Nursing Homes has worked in close co-operation with the Welfare Department who are responsible for Homes for the Aged, particularly in ascertaining and inspecting unregistered homes.

Nurses' Bureau

There is one Nurses' Bureau now registered at 31 Saxby Street. The Nurses' Bureau at 421 London Road surrendered its registration in December, 1958.

T. A. I. REES

May, 1959

TABLE 8

LIST OF

REGISTERED NURSING HOMES

(INCLUDING MATERNITY HOMES)

ADDRESS				No. of BEDS
Stoneygate Nursing Home, Stoneygate Road	..			10
Central Nursing Home, 6 University Road	..			15
Sundial Nursing Home, Aylestone Road	..	..		20
St. Francis Private Hospital, 362 London Road	..			31
Springfield Road Rest Home, 35 Springfield Road	..			8
The Lawn Nursing Home, London Road	..	..		22
Dane Hills Convent	..	..	..	56
"Ava," Ratcliffe Road	..	..	..	11

Maternity and Child Welfare Dental Service Report for 1958

by

P. S. R. CONRON, L.D.S. R.C.S.(Eng.)
Chief Dental Officer

The Local Authority dental service provides free treatment for school children, pre-school children, including those at Day Nurseries, expectant and nursing mothers and, to a limited extent, for the Emily Fortey School.

This report deals specifically with treatment carried out for the Maternity and Child Welfare service, namely expectant and nursing mothers and pre-school children.

Staff. Despite fluctuations during the year the staffing strength remained virtually the same as in 1957, less than half of the establishment. A gap occurred between my predecessor, Mr. C. A. Reynolds, leaving this Authority and my arrival here, resulting in a drop in the number of sessions devoted to the Maternity and Child Welfare service. Despite this drop there is no waiting list and more mothers and more pre-school children were made dentally fit than in 1957.

Mothers. The tables following this report show a marked increase in the number of dentures supplied. In all 112 full upper or lower and 17 partial upper or lower dentures were fitted for 71 patients, the prosthetic work being carried out at the Authority's own dental laboratory at Overton Road clinic ; 27 mothers had scaling done by dental officers and a further 14 by the oral hygienist. Attendances of mothers numbered 658, failed appointments 163, a wastage of nearly 23 sessions over the year. Altogether 131 mothers were made fit during the year.

Children. Although less sessions were devoted to the Maternity and Child Welfare service as a whole this year, it will be seen from the tables that more pre-school children were examined, treated and made dentally fit than in 1957.

MATERNITY AND CHILD WELFARE SERVICE, 1958

(a) Numbers provided with Dental Care :

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	158 (186)	157 (186)	186 (195)	131 (110)
Children under 5 { Day Nurseries	187 (106)	42 (54)	44 (29)	42 (20)
Others ..	127 (124)	135 (117)	120 (112)	117 (107)
Total ..	314 (230)	177 (171)	164 (141)	159 (127)

(b) Forms of Dental Treatment provided :

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		
							Full Upper or Lower	Partial Upper or Lower	Radio-graphs
Expectant and Nursing Mothers	27 (49)	66 (134)	- (1)	— (—)	892 (1,209)	77 (96)	112 (60)	17 (28)	10 (6)
Children under 5 { Day Nurseries	— (-)	94 (103)	10 (2)	— (-)	40 (2)	14 (2)	— (-)	— (-)	— (-)
Others ..	— (-)	14 (32)	2 (2)	— (-)	334 (286)	92 (75)	— (-)	— (-)	— (-)
Total ..	— (-)	108 (135)	12 (4)	— (-)	374 (288)	106 (77)	— (-)	— (-)	— (-)

(1957 figures in brackets)

Report of the City Analyst

for the year 1958

by

F. C. BULLOCK, B.Sc., F.R.I.C., P.A.Inst.W.E.
(Public Analyst and Official Agricultural Analyst)

To the Chairman and Members of the Health Committee

The year 1958, during which a record number of samples was examined in connection with the various branches of our work, will also go down in our archives as a memorable one for a number of reasons.

(i) On the 1st January, you, Mr. Chairman, were Lord Mayor of this City and I was President of the Association of Public Analysts. This combination of circumstances was considered adequate justification on my part to arrange for the Public Analysts of the country to hold one of their regular meetings in Leicester. On your part, Sir, you honoured us with a Civic Lunch. The meeting as a whole was most successful, the technical contributions being given largely by members of my own Staff. In return for your hospitality we like to think that the optimistic note on which you left us at the lunch-table, when you departed to encourage the local football team playing that day at Birmingham, brought about the turning point in the team's threatened demise from the First Division !

(ii) The distant rumbling of the radiation hazard which has been with us since 1945 and was more sharply drawn to our attention by the Windscale episode in October, 1957, showed no trend during the year that could provide justification for any policy of complacency. In view of the reality of the potential danger many local authorities began to take such steps as they considered appropriate to detect and, as far as possible, combat this hazard. As one move by the Leicester Authority which is also a water undertaker of considerable magnitude, I was sent to Harwell early in the year under review for a fortnight's course on the technique of monitoring water supplies for radioactivity. The course

was an excellent one and the period of its holding coincided with the publicising of the most successful experiment with Zeta which apparatus we were privileged to see. On returning from the course I received authority from the Health Committee to make a start on acquiring monitoring equipment, and in due course to examine smoke filters and local water supplies for radioactivity. The Deputy Public Analyst attended a course held locally to be brought up to date in the basic technique.

(iii) Later in the year the Society for Water Treatment and Examination, which as far as I know is the only society in the world devoted purely to that specialised subject, visited Leicester for their annual conference. Your successor in High Office did this Society the honour of greeting them with a Civic Reception and lunch. The meeting provided an opportunity of showing chemists and bacteriologists from all over the country the developments at our local works at Thornton and Cropston which had recently been opened by yourself. A visit was also made to the treatment works for the River Dove scheme which has now become well-advanced. The Chairman of the Water Committee and the Water Engineer and his Staff gave hospitality and other practical co-operation in making this visit a most successful one.

(iv) Another special event to be mentioned is the attendance of yourself, your Vice-Chairman and your Analyst at the Fourth Symposium on "Foreign Matters in Food Stuffs" held in Paris in July, 1958. The increased use of synthetic chemicals in food stuffs continues partly for the benefit of consumers, largely for the convenience of the manufacturers but perhaps inevitably in view of the growing world population and the necessity to take steps in many countries against malnutrition. Nevertheless, on any grounds the interference with the food supply of human beings with chemicals, which are foreign to the human system, must be watched and rigidly controlled on an international basis lest the practice get out of hand and unsuspected evils come upon us through the premature application of modern scientific discoveries. Anti-biotics, antioxidants and such-like useful aids in modern technology are valuable when kept under strict control but they can only be accepted for use in food stuffs if they can be proved non-injurious to the ultimate consumer over long periods, in amounts which are large enough to be effective for their immediate purpose. This visit enabled us to make contact with colleagues from America, Holland and other European countries. It was very well worthwhile to myself as Public Analyst, to you as a member of the Government-appointed Food Hygiene Advisory Council, and in your office as Chairman of the Leicester City Health Committee. The Vice-Chairman's special medical

knowledge enabled him probably to see further into the significance of some of the proposals than his two colleagues.

(v) One further event can appropriately be mentioned under this introduction to my report, although it will receive fuller treatment elsewhere. I refer to the Clean-Air Exhibition held during November and December and opened by Mr. Philip Noel-Baker. Leicester can fairly claim to have been a pioneer city in the problem of smoke abatement. One of my first duties on appointment as Assistant as long ago as 1925 was to install three standard deposit gauges for measuring the level of pollution at three different points in the city. My predecessor had started the work some years previously.

The emphasis today has of course shifted from the collection of scientific data obtained in order to assess the magnitude of the problem to the adoption of all remedial measures practicable to abolish the evil or at any rate minimise it and to enforce provisions of the Clean-Air regulations. The problem is undoubtedly largely one of education, and many parties of school children and students showed great interest in our particular aspect of the exhibition as it was hoped they would. I understand the exhibition as a whole was considered by those who organised it as most successful in reminding the public and industrialists of the danger and wastefulness of a smoke-polluted atmosphere.

My report is written on the same lines as in previous years with the essential data classified in tables at the end. A few notes of interest on some individual samples and certain aspects of our work are given on the following pages to make the report reasonably presentable to the layman.

LEGISLATION

During the 99 years in which the Pure Food Laws have been in force in this country, probably the two outstanding items of legislation, other than the several Enactments designed particularly to secure an improved hygienic standard for milk, have been :

1. The Sale of Food and Drugs Act, 1875.
2. The Public Health (Preservatives, etc. in Food) Regulations, 1925.

The former remained usefully workable for 53 years until revoked and superseded by the Food and Drugs (Adulteration) Act, 1928. The latter, many times amended, partly revoked and re-enacted, occasionally pruned and sometimes amplified, has provided a useful nucleus on which further legislation more particularly directed to the larger

question of food additives in general—as distinct from preservatives in particular—has been possible.

The convenient expression “etc.” in the original Regulations referred to the fact that not only preservatives, but also colouring matters in foods and thickening substances in cream were controlled. During 1958 the title became Public Health (Preservatives, etc., in Food) Regulations, 1925–1958, with the coming into force of two sets of Amendment Regulations S.I. No. 1319 and S.I. No. 2167. The former provided a check on the sale and importation of citrus fruit containing diphenyl or orthophenylphenol or mixtures, other than within prescribed limits. The second amendment S.I. 2167 added other fruits—apples, pears, pineapples, peaches and melons—and articles of food containing any such fruit to the list, which originally included only citrus fruits.

The only other important Statutory Instrument introduced during 1958 and having a bearing on the composition of Food was No. 1454, entitled *The Antioxidants in Food Regulations*, 1958. This instrument permitted the addition, under prescribed conditions, of a number of organic chemical substances to certain edible oils and fats, butter for manufacturing purposes, and to certain essential oils for the purposes of delaying their development of rancidity by oxidation.

Circular FSH 6/58 introducing a dossier prepared by the Ministry for the guidance of those concerned with the safe use of potentially dangerous chemicals in agriculture and food storage was, by courtesy, distributed to Food and Drugs Authorities and Public Analysts for information in the exercise of their responsibilities under the Food and Drugs Act, 1955.

Circular FSH 13/58 referred to the Food Standards Committee report on limits for copper content of foods, as published in 1956, and stated that the Ministry accepted the views of the Committee and considered that consumers would be adequately protected if limits which are consistent with good commercial practice were achieved. For the time being therefore they considered it unnecessary to give Statutory effect to the recommended limits.

The F.S.C. report on Copper content of Foods thus proves a valuable guide to Public Analysts, but no legal action can arise except in the case of amounts grossly exceeding those recommended.

The Poisons List Order 1958 No. S.I. 1015 and the Poisons Rules 1958, S.I. 1016 were issued by the Home Office embodying changes and amendments as recommended by the Poisons Board under the Pharmacy and Poisons Act, 1933.

STAFF

The Staff position continues to be more stable. The list printed in the 1956 Report remains substantially the same up to the end of 1958, the only change being that Mr. W. Cassidy left during the year, in time, in fact, for his departure to be notified in the report for 1957. His place was filled in due course by the appointment of Mr. L. R. Bays, A.R.I.C.

I am very pleased once more to record the willing and industrious way in which all duties by members of the staff have been carried out, and I would like to acknowledge once more the help I received in our contribution to Civil Defence work from Mr. Pike, Mr. Cassidy while he was with us, and from Mr. Bays immediately after his appointment.

Atmospheric Pollution

It has been customary in previous reports to deal first with the examination of food and drugs, and to consider other matters including water examination, atmospheric pollution investigations, etc., afterwards. This is purely a convention, and implies no order of priority from the point of view of importance in public health.

As newly-born infants, I imagine that we breathe before we eat or drink ; as adults, the weight of air that we breathe in any given time is probably six or seven times the weight of food material that we consume whether in solid or liquid form. Moreover we have considerable freedom in selecting the foods and drink that we use ; and as far as our knowledge is able to guide us and our pockets permit us to implement our ideas, we can choose our food from the purest and most reputable sources, while the air we breathe must inevitably be that of the vicinity where we happen to be at any given time.

The increasing amount of pollution that has accompanied industrial development and a rising population, is known with fair certainty to be responsible for many respiratory diseases and to be suspect in connection with the increasing incidence of lung cancer. Apart from its deleterious effects upon human health, it is also responsible for much waste in other directions. This is exemplified in the destruction of buildings, corrosion of metal structures, contamination of fabrics and the promotion of fog and smog, a veritable cause of danger in the case of traffic, whether on land, on sea or in the air. A considerable literature on this subject has been accumulating now for at least the past two generations and much of it is, in the nature of things, repetitive.

In Leicester we have been measuring and recording the amounts of air pollution for over 30 years. Maybe we have erred in looking on the

black side and not on the bright, and have over-stressed the pollution aspect rather than devoting our endeavours to recording the sunshine, oxygen content and other beneficent aspects of the atmosphere. Indeed we were accused some years ago in the local press of being "quite clear about the fog but completely in the dark about the sunshine". Nevertheless, there is something to be said for knowing the worst as this increases the incentive towards finding a remedy. The knowledge derived from these investigations (and the figures we have obtained are simply part of a concerted effort organised throughout the country) has fairly conclusively identified the smoke from coal burnt in the raw state in open grates as being probably the main source of pollution and has been one of the influences which ultimately led to the promotion of the Clean Air Act and the conception of smokeless zones.

In due course these measures should result in a very considerable improvement in the clarity of our atmosphere and the improvement of our health.

Unfortunately other contributory sources of pollution have in the meantime come about, in particular diesel engine fumes and later, radioactivity, which wherever it is produced seems in due course to encompass the globe.

Tables O and P are a continuation of similar tables that have been published in our previous reports. In 1957 five sets of apparatus were installed to measure daily levels, at selected points in the city, of smoke and sulphur dioxide pollution, and new tables Q and R give the figures obtained in 1958. The selected sites are at one central point in the city (Grey Friars) and at four peripheral points in the North, East, South and West suburbs respectively. In matters subject to so many variables as atmospheric pollution, one complete year is not very long on which to base any generalisations ; but the figures, for what they are worth, show at a glance that at all five stations the amounts of pollution are at a maximum in November, December and January, and decline to a minimum during July and August, and that the central site catches most pollution.

The wind is a principal factor in circulating and distributing the pollution once it reaches the atmosphere, and it is understandable that from whichever direction the wind is arriving, the central site at Grey Friars will get the general polluting effect from approximately half the city. When the wind is directly from the south, it might be assumed that the site on the southern boundary would show a comparatively light level of pollution, whereas the site in the north can be expected to show nearly as much as the point in the centre of the city ; similarly

for other wind directions. This is not the only factor, of course, since a strong westerly wind will carry over some pollution from the industrial area around the Black Country (a friendly gesture from Birmingham, so to speak!) whereas an easterly wind which travels mainly over open country is likely to be comparatively free from pollution when it arrives and until it has traversed a significant part of the city. These phenomena are borne out very well by the daily observations, and the net effect at the end of the year is that in the centre of the city the average level of sulphur dioxide pollution is more than twice that at any of the other sites while the amount of suspended smoke is about 50 per cent higher.

Drinking Water

The water-consuming population of our area continues to increase and is now approaching the half million mark. The increase is due not only to continuous building in the present area of supply but also as a result of an extension of the statutory area since the 1st October, 1958.

The taking-over of a number of county areas in the rural districts of Barrow-upon-Soar, Billesdon, Lutterworth and Market Harborough has temporarily added some small supplies to our present resources and the control of the supply as a whole becomes more complex. Some of these newer small supplies have not had the benefit of the first two recognised lines of defence in water purification, namely a clean catchment area and a period of storage; they are in fact derived from underground springs and drains, and by the very nature of the origin of such supplies the quality of the water is precarious until it is efficiently treated. In consequence, an increase in the over-all number of samples has occurred and some consequential changes in the routine arrangements.

It is pleasant to record a factor operating in the other direction namely that algal growths in the local reservoirs gave very much less trouble than in previous years.

In the previous year's report it was recorded that following laboratory tests, pressure filtration was put on a working basis at Hallgates Filter House where Cropston water and some Derwent water is now treated. A comparable treatment was put in force at Thornton during 1958 and necessitated a fair amount of experimental work before the process could be said to be working satisfactorily. In the meantime the old slow sand filters had been retained as a stand-by and chlorination treatment installed so that at no time was there any question about the safety of the finally treated water as put into supply from these works for general consumption.

As in previous years a few critical members of the public found occasion to lodge complaints about their water supply. In every such instance samples were examined to confirm or repudiate the complaint and to determine the cause of the trouble, if any, and to put the matter right. This independent check by the public is welcome and in one instance during the year a complaint by the consumer led to the discovery of service mains in need of flushing and a storage tank in need of attention. Besides the routine series of samples from the various works, random "In Supply" samples were also taken from scattered points in the city. One of these latter samples led to the discovery of a small section of the distribution system which was supplying water of safe quality but slightly below the usual high standard. The necessary treatment was put in hand immediately by the Water Engineer.

Further reference to this subject will no doubt be found in the section contributed by the Water Engineer and Manager on page 23. The miscellaneous samples of water and of other materials analysed on behalf of the Water Engineer are set out in Table W at the end of this report.

Swimming Bath Waters

Table F presents a very satisfactory picture of the efficiency with which the water in the local swimming pools was maintained in a safe, sterile condition during the year. Only one sample out of a total of 132 failed to reach the accepted bacteriological standard. This particular sample was taken at the bath of a local school, where on five occasions out of eight during the year we reported that an insufficient chlorine dose was being used. This is the only local swimming pool not provided with up-to-date chlorinating equipment. At all the other swimming pools the usual trouble, on the few occasions that we had occasion to make adverse criticism, was that more chlorine than necessary was being used.

The necessity to cope with a varying bathing load of variable "quality" presents a difficult problem for managers of swimming pools, and their natural desire to be prepared at all times for a surprise visit from the sampling officer may lead them occasionally to be somewhat generous with the chlorine. They may, for instance, desire to anticipate a large class of schoolboys using the pool. Temporary heavy doses are readily deviated by a fresh influx of bathers and an occasional excessive residual of chlorine can be looked upon by the Health Authorities as a good fault, particularly when it is known that the local experience of the manager in question enables him to use his discretion in judging how much extra chlorine the water can sustain temporarily without its too

potent action persisting through the period of occupation of the pool by the next batch of bathers. Moreover there is a growing experience that swimmers are developing in these days of breakpoint chlorination a considerable tolerance for highish amounts of chlorine if it is present in the "free" form and not there in combination with nitrogenous impurities in the water. Although the position is not ideal, therefore, we are loathe to complain about moderate excess of chlorine, particularly when the pH of the water indicates that it is on the alkaline side of neutrality.

An acid reaction in the swimming water is considered to be undesirable, from the point of view of the comfort of the bathers, and it is now widely accepted that the water should be maintained at around pH 7.6, that is, slightly alkaline. At most of the baths no difficulty appeared to be experienced in maintaining this reaction in the water, but one of the privately-owned outdoor pools failed to come up to the standard on five occasions out of nineteen. Presumably alum was used for coagulating the water and the acid reaction produced by the alum was not neutralised by the limited amount of sodium carbonate added at the same time. We recommended that increased amounts of sodium carbonate be used and the trouble was overcome well before the end of the swimming season.

One non-routine experience occurred during the year. We learned by a telephone call early one morning that the largest outdoor swimming pool had turned deep red overnight, and in the original message the suggestion was somewhat hesitatingly made that the redness was due to blood! The unusual complaint seemed to justify a personal visit to the pool immediately and, finding members of the local police force in charge the situation began to develop a dramatic aspect. One glance at the water suggested to me that the colour was due to permanganate and a close examination of the margins of the pool revealed fine particles of permanganate of potash which had been blown there by the wind as the culprit had walked around the edge of the bath tipping in his doses of permanganate. The impossibility of seeing the bottom at the deep end of the bath rendered it advisable to forbid swimmers for the time being using the water, and the manager was persisting with his most readily available method of attack, namely, intensive chlorination of the water, hoping that this would destroy the colour. Had the colour been an organic dye this treatment might very well have proved effective, but it so happens that the oxidising action of permanganate makes it more akin to chlorine itself than to most other red colouring matters, and a recognised antidote to colour due to permanganate is the general organic impurity often present in water itself. Indeed, had they

been available, a few scruffy bathers would literally have been worth their weight in scruff in dissipating the unwanted red colour. More readily to hand was another de-oxidising agent, namely a supply of photographic hypo which proved an equally effective and more aesthetic antidote.

From the point of view of association of ideas this city rather missed the boat over this incident in permitting to get into the press the description "colour of beetroot" as describing the bulk shade of the swimming bath when it contained the permanganate in solution. The fact that the colour was permanent for a matter of hours was indeed an excellent testimonial to the organic purity of the original water but the only aftermath was a reference in *The Times* fourth leader a few days later to the lack of charm of the beetroot as a vegetable in general and to the unprepossessing vision conjured up by the term "beetroot" as a description of a shade of colour. It would have been much shrewder on our part to have likened the bath to a pool of Vintage Claret or even Burgundy, which indeed was one of the terms used to describe the unwonted shade at the time.

FOOD AND DRUGS ACT, 1955

MILKS

Of the 1,572 samples submitted under the Food and Drugs Act, only 13 failed to comply with the well-known presumptive standards. Three samples were low in fat, that is below 3.0 per cent, and seven were low in solids-not-fat, that is less than 8.5 per cent, while three samples were deficient in both respects. No added water was proved to be present in any of these samples and a survey of the milk samples examined as a whole reveals a very satisfactory state of affairs. If, in this area, extraneous water is getting into milk accidentally or otherwise, it is certainly escaping our notice.

Nearly 1,300 of the samples were examined somewhat statistically for composition, and the results are given in Table C. While the figures covered a fair "spread" the average composition of these samples was 3.76 per cent fat and 8.72 per cent solids-not-fat ; both figures well above the presumptive standards.

The position as regards milk was in fact very satisfactory in all respects. No foreign material nor any dirty bottles came to our notice, and of the 1,253 samples examined for efficiency of Pasteurisation, only one failed to give a satisfactory test. This was probably a raw milk submitted in error.

The results obtained on examination for cleanliness and keeping quality of milk samples, using the Methylene Blue Test, are set out in Table E ; about 96 per cent of the samples examined were satisfactory.

Miscellaneous samples of food which, for one reason or another were certified as not genuine, are shown in Table D (a) and Drugs in Table D (b). Comments on some of the samples are given below. The percentage of adulteration was 5.6 for foods other than milk and drugs.

Condemned Food Samples (Table D (a))

Bread No. S.379

The sample was a portion of loaf, submitted because two black bodies of unknown composition had been observed by the purchaser. In a covering letter he asked for an examination "as a matter of interest". This philosophical attitude towards foreign appearances in one's food is unusual ; more often, people are inclined to assume that by observing the stray material just "in the nick of time" they have had a fortunate though narrow escape from being poisoned. In this instance the purchaser's restrained reaction was fully justified, since the black bodies proved to be simply fragments of charred starchy material ; their presence did not render the rest of the loaf inedible.

Marmalade Nos. 186 and 187

These samples, in the opinion of the person submitting the sample, had a glue-like smell and taste. We agreed about the smell and moreover detected an unpalatable astringency to be present. Chemical analysis did not confirm the presence of any glue as had been alleged, but revealed metallic contamination to the extent of 310 parts per million of iron and 20 parts per million of copper. Evidently some low grade fruit pulp of uncertain history had been used in manufacture. The only reply we received to our request for observations from the manufacturer was a guarded promise that he would take "more energetic measures in quality control in the future".

Home-made Marmalade No. 413

This was a somewhat runny product, howbeit palatable and no doubt wholesome. The soluble solids content was low (62.7 per cent instead of the minimum 68.5 per cent required). The manufacturer promised to give the future batches "more boiling". Like the marmalade, the label was also of the home-spun variety and did not take the form required in the Labelling of Food Order.

Sugar No. S 380

Mystery surrounded the history of this sample just prior to our receiving it from a canteen of a local works. The person submitting it suspected that all was not sugar that tasted sweet, and in fact we found 6 per cent of the sample consisted of Potash Alum. A fee was paid without comment and our curiosity was never satisfied.

Meat Pie No. S.381

The pie had a piece of white cotton thread protruding from its crust, the visible portion being about 2 inches long. About the same amount was embedded in the pie. On investigation, the thread was identified as a portion of the material used to fasten the labels to the flour bags, and suggested that the flour had not been sifted.

Clotted Cream No. S.382

The would-be consumer of this sample observed something to be present that was not readily visible, but had a consistency other than that of normal clotted cream. We detected several fragments of paraffin wax in the cream, presumably a specimen of material used in the process of making the cartons waterproof.

Biscuit No. S.383

The complainant in this instance reported that when her daughter bit a piece off the biscuit "she wondered what was sharp against her mouth". We found that a coarse fibre of ligneous vegetable tissue had done the damage. The mother rightly considered that more care should have been taken in the production of the biscuit.

Tea No. 525

A half-pound of tea, purchased at random, was presented in a packet carrying a good deal of printed matter, declaring the aim of the packer to give "Best Service", "Best Value", "Best Quality", etc., but nowhere on the packet could we find the operative word "Tea".

The label was defective from the point of view of the Labelling of Food Order, 1953, and in the words of that Order "in that the specific description of the contents was not given". Not a very serious offence one might think, but a possible alibi for the defence should the contents, for any reason, have become the subject of a prosecution. The packer was genuinely surprised at our complaint and we spent an amusing few minutes watching him scrutinise the packet for the missing word "tea". This appeared on future packets in the form of a rubber stamp overprint

pending a reprinted consignment. Curiously enough in the same batch of samples a packet of coffee was received for analysis on the printed wrapper of which the most conspicuous word was "Tea".

Weaning Food No. S.384

Perforations about 1 mm. in diameter, resembling those produced in wooden furniture by the wood borer, occurred in the cubes of this sample of weaning food (carrot variety). Four cubes of the food were submitted for our examination and not only they but the paper wrappers and the cardboard container itself were perforated.

From one of the cubes a beetle resembling the drug room beetle (*Sitodrepa panicea*) was extracted, and there was evidence of more of these beetles and their excrement in the other cubes. Whatever category, therefore, the original food came under, it appeared to finish up as "vegetable and animal with mineralised attachments".

Butter No. S.387

This sample was presented for examination in an open butter dish. Embedded in the butter was a piece of paper, obviously a sweet wrapper. Paper *per se* of known antecedents is not necessarily very objectionable, but the possibility of undesirable contamination having accompanied this particular paper was not precluded.

Tinned Peas No. S.388

In this instance a baby newt had not only maintained its integrity right through the whole sequence of processes in field and factory, but it had emerged, still in one piece, on to the dinner plate of the purchaser's husband.

This might well have proved to be its "last scene of all" even as a dead newt, but the gentleman spotted it as a potential foreign body and sent it to us for identification.

The newt was about 2 inches long, deeply dyed matching the peas, and cooked to perfection—as judged by the end of a spatula! While it might very well be that no harm could have ensued from its ingestion—indeed a Frenchman might have preferred it to the peas—we felt that it was a clear case for reporting "not of the nature and substance expected by the purchaser". The vendor was fined £10.

Bread Rolls No. S.389

Some black pellets detected in the crumb of two of the rolls were unmistakably mouse excrement. A good deal of similar material was

found in sweepings taken from the bakery at about the same time. In this instance we added the further comment "... and unfit for human consumption" to the certificate. The vendor was fined £20.

Canned Tuna Fish No. S.390

Two house flies were present on the surface of the sample of fish submitted to us. On close examination they were found to be intact and undamaged, and hardly looked as if they had been processed along with the fish. There was, therefore, insufficient evidence to exclude the possibility of the flies having gained access to the fish unseen after the can had been opened.

"Bottles of Beer" Nos. S.395 and S.406

These samples were submitted to the Department as "Bottles of Beer"—both samples contained a "foreign body". The foreign material proved to be a mould growth in a fair state of development. The samples were reported to be "not of the quality expected by the purchaser", but that probably the beer itself would be non-injurious if consumed.

In correspondence, the brewer explained the method used in the bottle washing process, and said that this mould growth had formed in the dregs of a bottle from which the main part of the beer had been used; and although detached by the detergent had been prevented from leaving the bottle by the constriction of the neck.

Meat Pie No. S.396

Between the upper crust and the meat filling of this pie a green appearance, consisting of a mould growth and hyphae, was detected. The retailer had submitted the sample as a precautionary method and was instructed not to sell any pies in a mouldy condition.

Bread No. S.398

This sample consisted of a portion of a wrapped white loaf, in the crumb of which were embedded several small black pellets. Rodent faeces had of course been suspected, but a close examination revealed that the particles consisted almost entirely of gelatinised starchy material, with grease and iron particles attached. The bakery explained their methods of cleaning the moulding machine and found that the air blast system was the probable cause of the trouble. The particles resulted from a build-up of oily dirt, which, when the right conditions arose after a lapse of time, were capable of being blown off the surface of the machine into the dough. Further steps were taken to remove this hazard from the process of manufacture.

Brown Bread No. S.400

This was a sample of brown bread containing somewhat similar pellets to those found in the previous sample. These however were found to contain semi-digested fibre and rodent hairs, and were undoubtedly pellets of rodent excrement. A full investigation by the miller and the baker failed to pin-point the exact source of the trouble.

Chocolate Swiss Roll No. S.403

The foreign body exhibited structures characteristic of insect tissue including fragments of the leg and wing of a fly. It is not easy to define the point at which material of this sort is sufficient in amount to condemn the whole sample, fragments much smaller than this might very well have passed unnoticed.

The confectioner was made aware of the occurrence and asked to tighten up his methods.

“Ready to Drink Grapefruit” No. S.404

The foreign material in this case, which had caused some distress to the purchaser, proved to be fragments of dark coloured woody tissue. The supplier of the fruit pulp was advised by the bottler and after investigation reported that the matter was probably fibrous material from the flesh of the fruit.

Family Tart (Raspberry) No. 1773

A novel point occurred in connection with this sample whereby the manufacturer was unable to use a conventional Raspberry Jam for filling his tarts, since they were required to undergo transport in a carton for sale at station buffets, etc., and required something more viscous than jam. He was, therefore, unable to use the word “Jam” lest his article should be judged by the standards prevailing for Raspberry Jam. Nevertheless, the omission of the word “Jam” would lead some purchasers to believe that the sample was a “Fruit tart” as distinct from a “Jam tart”—which it certainly was not.

The manufacturer ultimately suggested using the wording “Family Jam Tart” since there is no legal standard for an article simply known as “Jam” and he hoped the flavour would prove acceptable to the consumer without any help from the labelling.

Cream Puffs No. S.411

These were submitted by the manager of a canteen of a local works as the result of a complaint made by one of the employees. Green

patches visible on the surface of the cream filling were identified as a recent growth of mould hyphae. The filling itself was quite sweet and wholesome, and the mould appeared to have originated on the pastry cases which had been prepared beforehand and stored under unsuitable conditions.

During the period of discussion of this sample, the bakery responsible for the production of the cakes went out of business, and no further action was taken.

‘Real Minced Chicken’ No. S.412

A dark coloured fragment present in this sample convinced the purchaser that it was a matter worthy of investigation. The appearance of the dark body on the surface of the mince was certainly such as to arouse suspicion. However, we identified the material as the stub of a small feather, and improved the occasion as far as we could by pointing out that this was at least circumstantial evidence that chicken rather than rabbit had probably been used in manufacture !

DRUGS (Table D (b))

During 1958 the Department received 289 drug samples for examination as set out in Table B. Eight samples were criticised for defective composition and seven for incorrect or inadequate labelling.

(a) Drug Samples of Defective Composition

Bronchial and Cold Mixture Nos. 2144 and 2585

The declared formula of these two samples which were from the same source indicated that the product should contain 70 per cent v/v of chloroform water (B.P.) whereas not more than 4.2 per cent and 2.4 per cent was found in the respective samples. The manufacturers advised us that they had revised their formula for this product since the 1958 B.P. became official and for some time the product marketed under this name had contained no chloroform. Labels for their new product were submitted for perusal.

Having considered all the circumstances, it was concluded that the chloroform deficiency of the above supply was probably due to overlong storage.

Calcium Aspirin (Stabilised) No. 1513

The ash content and other tests were consistent with the material having been accurately compounded in the first place, but the presence

of about 11 per cent of free acetic acid suggested a considerable degree of hydrolysis amounting to more than one-third of the amount of calcium aspirin declared present. The sample was reported against as being “not of the quality demanded” and, as a result of subsequent investigation, it was proved to have deteriorated during long storage.

Calcium Lactate Tablets No. 1942

This sample was purchased as “Calcium Lactate Tablets” and contrary to ethical pharmaceutical practice was presented in a box labelled simply as “The Tablets”. The tablets were found to vary considerably in weight and were eventually sorted into three different “species”, 94 of average weight 0.55 gramme, five tablets of average weight 0.44 gramme and one of larger size weighing approximately 0.6 gramme. Analysis indicated that only the five small tablets were calcium lactate, the remainder consisting of sodium calcium lactate in a very damp condition. The vendor was cautioned.

Cod Liver Oil Nos. 115 and 2116

Cod Liver Oil is required by the British Pharmacopœia to contain not less than 600 International Units of Vitamin A per gramme. Sample No. 115 contained only 538 I.U’s per gramme, whilst Sample No. 2116—a formal follow-up specimen of the previous sample contained only 518 I.U’s per gramme. The sample proved to be old stock.

Glauber’s Salt

Unless packed with special precautions Glauber’s Salt is liable to lose its water of crystallisation, resulting in a product which contains a greater percentage of sodium sulphate than required by B.P. specification. This deficiency of water is not necessarily to the prejudice of the purchaser but might make dosing inaccurate. The above sample contained the equivalent of 135 per cent sulphate decahydrate, whereas the B.P. limits are 97.5 per cent to 110 per cent.

Solution of Hydrogen Peroxide B.P. No. 2683

The B.P. requires that “Solution of Hydrogen Peroxide” shall give a slightly acid reaction. This sample required less than the minimum amount of alkali specified by the B.P. for neutralisation. We reported that the sample was satisfactory regarding hydrogen peroxide content at the time of examination, but that the low acidity would probably adversely affect the keeping quality of the sample.

(b) Drugs submitted with Defective Labelling

Gluco-Juice Blackcurrant Drink No. 1402

A label on the front of the bottle presented this article as an attractive drink ; another label on the back of the bottle carried statements calculated to recommend the substance as a medicine. On this label the composition was declared in a general way under the Pharmacy and Medicines Act, 1941, but the statement was incorrect in detail, and there were inconsistencies on the two labels likely to mislead the purchaser.

On the front label the statement occurred "plus the instant energy of glucose", the word "glucose" being in $\frac{1}{4}$ in. gold letters. The declaration on the back label claimed that the sample contained "8,500 mgms. liquid glucose w/v per fluid ounce". Thus the alleged virtues of glucose (dextrose monohydrate) as a source of energy was claimed, whereas in fact "liquid glucose" was the substance actually declared, and this contains not more than 20 per cent of glucose proper. It was considered that the actual content of dextrose monohydrate should be declared.

While confusion might exist in the minds of the public between "glucose" and "liquid glucose", this article was marketed by a manufacturing chemist for distribution to pharmacists, and the ambiguity, implicit in the indiscriminate use of the two terms seems to be unethical. Moreover, the expression in milligrams of an article like "liquid glucose" is most unusual, amounting to a form of bluff calculated to elevate liquid glucose to the status of a vitamin.

A further criticism was that on the front label the "instant" energy of glucose was claimed, whereas on the back label the preparation was claimed to be "an ideal medium for giving growing children energy *building* glucose". It may be said that the word "building" is not appropriate to "instant" energy but might perhaps be applicable to "potential" energy.

The opinion was expressed that whilst the sample was found to conform to the compositional data, the claims made were calculated to mislead the purchaser as to the true dietary value of the product. The manufacturers however stated that the labels had been submitted to, and approved by, the Pharmaceutical Society of Great Britain and the Proprietary Association of Great Britain.

Light Magnesium Carbonate Nos. 1547 and 1553

Both these samples were labelled inaccurately by the respective vendors. The former sample was described as "Magnesia" although

light magnesium carbonate was the material supplied. From the point of view of the general public, no harm would be done since confusion has so long existed between the precise meanings of the two terms, but strictly speaking "magnesia" is the oxide of magnesium and there is no official drug under that name, the choice being either "light magnesia" or "heavy magnesia." The latter sample was labelled as "Carbonate of Magnesia". Since the article supplied was light magnesium carbonate the name given by the vendor to this sample was nearer to the truth of the matter and perhaps we are at fault ourselves in being over pedantic in expecting the expression "carbonate of magnesium" to be used.

Soda Mint Tablets Nos. 1609, 1610 and 1611

These were all normal and satisfactory samples of Soda Mint Tablets, but were submitted inadequately labelled, one specimen being submitted in a bag labelled "Cherry Cough Pastilles", together with the legend "Excellent for Coughs and Colds".

The presentation of medical products in this manner is considered to be pharmaceutically unethical. Provided no recommendation as a medicine is made then many medicaments can legally be sold in unlabelled packets. In the interest of public safety it is desirable that such products should be correctly labelled so that easy identification of the substance is ensured and confusion with sugar confectionery is avoided. It is to be regretted that the disc-shaped tablet has not been reserved solely for medicinal products.

Sulphur Tablets No. 2058

These tablets were declared to contain 50 per cent sublimed sulphur ; 46.6 per cent of sulphur was found and accepted as being satisfactory within manufacturing limits of error. However, the carton in which the tablets were packed was labelled "Orange and Sulphur Tablets" and bore an illustration of an orange. This was regarded as misleading, since the product did not contain orange as such, but only orange oil for flavouring purposes.

The maximum dosage for sulphur is stated in the B.P.C. as 4 grammes, whereas it was stated on the carton that the tablets "may be taken freely by children and adults". This was considered to be an invitation to take an overdose of sulphur, since the carton contained a total of approximately 7.25 grammes of sulphur. It was our opinion that the dosage should be more specifically defined, and the manufacturers were informed of this view. A reply stated that this product had been packed and sold in this form for many years, but owing to

diminishing sales the pack had not been modernised and might shortly be discontinued.

Ice Cream

The composition of the samples of ice cream examined through the year are given in Table N. The steadily decreasing number of samples examined since 1953 reflects our subconscious satisfaction with the average composition of modern ice cream, and its freedom from metallic and other contamination. At the time of writing, the Food Standards (Ice Cream) Regulations, 1959, have just been received and will come into force on the 27th April, 1959, when connoisseurs of this commodity will be able to choose a high quality variant of ice cream known as Dairy Ice Cream in which all the fat will be derived from cream or butter.

PUBLIC RELATIONS

Ten talks to various local societies and organisations were given during 1958 by members of the staff. Several requests for talks from further afield, or on inconvenient dates had to be declined.

Information and advice on technical matters was supplied on many occasions to various enquirers.

People suffering from "persecution complex" are very difficult to help, and quite impossible to satisfy ; but we have clients in this category who seem to consider it worth while making repeated visits. One fresh case turned up this year who required a single cause, preferably one for which a near-neighbour could be blamed, which would explain the following symptoms : (a) food going mouldy in the pantry ; (b) a stain appearing on a bedroom ceiling ; (c) rust appearing on the dining room grate ; (d) a lump of grotto disintegrating in the garden, and (e) a stifled depressed feeling by the complainant herself, when she was at home. When I ventured to suggest, with all due diffidence that it was possibly the weather, it was immediately obvious that this was not the answer that was expected or desired !

The slimming craze led to a number of enquiries, and one lady wrote in asking for us to recommend the brand of bread that was most starch-reduced. By practical tests she had come across one that worked reasonably well and moreover liked it because it was "thinly sliced". I replied that since the only bread, whether starch reduced or not, that was slimming was the bread that one did *not* eat, and that if she worked her ration out according to the number of slices, then the thinly sliced brand was by far the best bet as far as she was concerned.

F. C. BULLOCK

TABLE A

Summary of Samples Analysed during 1958

Sampled under the Food and Drugs Act, 1955

(A) Submitted by Sampling Officers :

(a) Milks	1,572
(b) Foods and Drugs	870
(c) Shellfish	18

(B) Food and Drug samples submitted by the public

(See Table J)	39
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2,499

Bacteriological Samples

Samples under the Milk (Special Designation) Regulations, 1949

1,213

Miscellaneous	1
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1,214

Daily Dairy Control samples for pasteurisation efficiency

1,253

Washed Milk Bottles (Estimation of Cleanliness) ..	247
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2,714

Fertiliser and Feeding Stuffs Act

Samples submitted under Fertilisers and Feeding Stuffs Act, 1926, by Inspectors (see Table G) ..

52

Samples submitted privately (see Table G) ..	19
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71

Rag Flock Act, 1911

Samples submitted by Public Health Inspectors ..	3
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Atmospheric Pollution	1,459
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Water Samples for Water Committee ..	3,738
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Miscellaneous Samples from other sources :

Health Department (see Table H)	418
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Other Corporation Departments (see Table H) ..	15
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From other sources (see Table I)	98
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531

Grand Total	11,015
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TABLE B

FOOD AND DRUGS ANALYSED DURING 1958

(Sampled by Public Health Inspectors under the Food and Drugs Act)

Foods Analysed :

Sample	No.	Sample	No.
Milk	1,572	Jelly	6
Almonds, Ground ..	6	Jelly (Milk) ..	1
Anchovy Paste ..	1	Lard	3
Apples	8	Lemon Barley Drink ..	1
Baby Food	1	Lemon Curd	6
Bacon	6	Lemon Juice	2
Baked Beans (Tinned) ..	6	Madeira Cake	4
Barley Wine	1	Mandarin Oranges (Tinned) ..	6
Beef Loaf (Minced) ..	6	Margarine	7
Beer	7	Marmalade	10
Biscuits (Shortcake) ..	12	Marzipan	6
Blackcurrant Sweets ..	1	Milk	1
Bread	1	Milk (Condensed) ..	5
Bread (Brown)	1	Milk (Evaporated) ..	6
Bread (Milk Loaf) ..	3	Milk (Fat-Free with Vegetable	
Butter	6	Oil	1
Butter Buns	1	Milk Shakes	3
Cakes containing Butter ..	6	Milk Shake Powder ..	1
Cheese	6	Mincemeat	6
Cheese (Processed) ..	6	Mussels	17
Chewing Gum	4	Mustard	7
Cocoa	3	Mustard Oil	1
Coffee	6	Orange Juice	1
Coffee and Chicory Essence ..	6	Orange Squash	5
Colourings and Flavourings ..	7	Oysters	1
Cordials	5	Peas (Tinned)	6
Cream	4	Pepper, Ground White ..	6
Currants	6	Pickles and Chutney ..	6
Curry Powder	6	Pineapple (Tinned) ..	8
Fat (Cooking)	3	Plums (Tinned)	6
Flour	16	Pork Luncheon Meat (Tinned)	6
Gelatine	6	Potatoes	12
Ginger	6	Puddings (Christmas) ..	6
Glucose Drink	1	Raisins	6
Grapes	6	Raspberry Tart	1
Ground Nut Oil	1	Rennet, Essence of ..	1
Guava and Grape Juice ..	1	Rice	7
Herbs	9	Rice (Creamed)	4
Honey	6	Sago Milk Pudding ..	1
Ice Cream	45	Salad Cream	5
Ice Cream Ready Mix ..	1	Salad Oil	1
Jam	13	Salt (Iodised Table) ..	4

TABLE B—continued

Sample	No.	Sample	No.
Salt Substitute	1	Tapioca	7
Sauces	7	Tarragon Mayonnaise ..	1
Sausages (Pork)	30	Tartare Sauce	1
Sausage Rolls	3	Tea	7
Semolina Milk Pudding ..	1	Toffee	2
Soup	6	Tomatoes (Tinned) ..	6
Soup Concentrate	1	Tomato Cocktail	1
Soy	1	Tomato Juice	6
Spices	8	Tomato Sauce	6
Steak and Kidney Pie ..	3	Treacle	1
Straws (Flavoured Drinking Straws)	3	Vinegar	6
Strawberries (Tinned) ..	6	Vinegar (Raspberry) ..	6
Strawberry Syrup	1	Whisky	6
Suet	6	Wines	6
Sugar (Demerara)	6	Yeast	6
Sultanas	6		
Syrup (Golden)	2	Total	2,171
Syrup (Old Tyme)	1		

Drugs Analysed :

Sample	No.	Sample	No.
A.P.C. Tablets	6	Cream of Tartar	7
Almond Oil	6	Easton's Tablets	6
Anti-Rheumatic Tablets ..	1	Eucalyptus Oil	6
Arrowroot	6	Gee's Linctus	6
Aspirin Tablets	6	Glauber's Salts	6
Blackcurrant Drink	2	Glucose	5
Boric Acid Ointment	6	Glucose Tablets	1
Boric Lint	6	Glycerin	5
Calcium Aspirin (Stabilised) ..	1	Glycerin of Borax	6
Calcium Lactate Tablets ..	7	Glycerin of Thymol	6
Camphor, Spirit of	6	Glycerin, Lemon and Honey ..	6
Camphorated Oil	6	Golden Eye Ointment	6
Cascara Sagrada Tablets ..	6	Hair and Scalp Lotions	2
Cider Vinegar	1	Halibut Liver Oil Capsules ..	6
Coconut Oil	6	Hydrogen Peroxide	13
Codeine Phosphate Tablets ..	1	Inhalers	6
Cod Liver Oil	6	Iodine, Tincture of	6
Cod Liver Oil and Malt	4	Laxative Chewing Gum	2
Cough Candy	1	Liquorice, Compound Powder of	6
Cough Mixture	7		

TABLE B—*continued*

Sample	No.	Sample	No.
Linseed Cough Mixture ..	1	Sodium Bicarbonate ..	7
Liquid Paraffin ..	6	Sulphur Tablets ..	6
Magnesia ..	1	Vitamin and Mineral Capsules	1
Magnesium Carbonate ..	9	Vitamin C Tablets ..	6
Olive Oil ..	6	Witch Hazel (Distilled) ..	6
Parrish's Chemical Food ..	6	Zinc and Castor Ointment ..	6
Peppermint, Oil of ..	6		
Saccharin Tablets ..	6	Drugs ..	289
Seidlitz Powders ..	7	Foods ..	2,171
Shampoos, Medicated ..	4		
Sleeping Tablets ..	1	Total Food and Drugs ..	2,460
Soda Mints ..	6		

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Yearly Averages
No. Examined	134	121	128	109	116	119	98	50	115	120	116	70	1,296
Average Fat ..	3.73	3.66	3.71	3.59	3.48	3.79	3.66	3.78	3.80	4.00	4.03	3.89	3.76
Average S.N.F.	8.75	8.75	8.76	8.68	8.68	8.75	8.65	8.65	8.63	8.84	8.83	8.62	8.72

CLASSIFICATION OF SAMPLES BASED ON FAT CONTENT

Range	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Yearly Total
Below 2.6 ..	—	—	—	—	5	—	—	—	—	—	—	—	5
2.6—2.79 ..	1	2	—	—	—	—	—	—	1	—	—	—	4
2.8—2.99 ..	3	—	—	—	2	1	—	—	—	—	—	—	6
3.0—3.19 ..	13	8	23	12	26	22	9	3	10	3	6	2	137
3.2—3.39 ..	15	24	12	16	24	18	12	5	10	9	5	3	153
3.4—3.59 ..	12	25	36	33	19	27	22	9	11	13	4	7	218
3.6—3.79 ..	37	21	14	27	16	10	16	17	27	16	11	16	228
3.8—3.99 ..	14	12	8	5	7	7	20	6	23	29	33	23	187
4.0—4.19 ..	11	13	8	5	6	10	8	3	13	15	21	5	118
4.2—4.39 ..	11	7	8	4	2	6	6	1	9	5	10	3	72
4.4—4.59 ..	7	3	9	1	3	4	2	1	4	10	8	1	53
4.6—4.79 ..	3	2	1	4	2	3	2	1	3	6	7	7	41
Over 4.80 ..	7	4	9	2	4	11	1	4	4	14	11	3	74
Total Samples	134	121	128	109	116	119	98	50	115	120	116	70	1,296

TABLE C. CLASSIFICATION OF SAMPLES BASED ON SOLIDS-NOT-FAT CONTENT

Range	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Yearly Total
Below 8.10..	—	—	—	—	—	—	—	—	—	—	—	—	—
8.10—8.19..	—	—	—	1	—	1	—	—	—	—	—	—	2
8.20—8.29..	1	—	1	—	1	1	—	—	—	—	—	—	4
8.30—8.39..	4	—	—	2	—	—	1	1	—	—	—	—	8
8.40—8.49..	4	6	6	4	9	2	9	4	11	—	2	7	64
8.50—8.59..	14	22	20	30	23	14	18	14	20	5	10	13	203
8.60—8.69..	25	23	26	22	20	27	33	14	37	19	7	27	280
8.70—8.79..	37	23	30	23	37	24	22	12	20	24	31	17	300
8.80—8.89..	25	14	16	18	13	26	7	1	11	35	28	1	195
8.90—8.99..	11	16	12	5	9	14	6	2	14	21	15	1	126
9.00—9.09..	7	7	9	4	3	5	1	1	2	4	10	3	56
9.10—9.19..	4	6	3	—	1	3	1	—	—	7	7	1	33
9.20 & Over	2	4	5	—	—	2	—	1	—	5	6	—	25
Total Samples	134	121	128	109	116	119	98	50	115	120	116	70	1,296

TABLE C. CLASSIFICATION OF SAMPLES BASED ON TOTAL SOLIDS CONTENT

Range	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Yearly Total
Below 10.50	—	—	—	—	—	—	—	—	—	—	—	—	—
10.50—10.99	—	—	—	—	2	—	—	—	—	—	—	—	2
11.00—11.49	4	2	3	—	5	3	—	2	—	—	1	1	21
11.50—11.99	27	29	29	29	40	26	21	8	24	7	9	6	255
12.00—12.49	40	46	50	57	46	50	41	29	36	25	14	33	467
12.50—12.99	36	25	22	14	11	13	29	5	43	51	55	18	322
13.00—13.49	20	12	13	5	8	15	6	2	7	18	17	7	130
13.50—13.99	4	4	4	4	2	6	1	2	3	9	11	4	54
14.00 & Over	3	3	7	—	2	6	—	2	2	10	9	1	45
Total Samples	134	121	128	109	116	119	98	50	115	120	116	70	1,296

TABLE D(a). Food Samples other than Milk reported "Not Genuine"

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
S379	Bread	Private	Contained two small black bodies identified as gritty material associated with gelatinised starch	Reported to Health Committee
186, 187	Marmalade	Informal	Glue-like odour: high degree of metallic contamination	Cautioned by M.O.H. All steps being taken to prevent recurrence of this trouble
413	Marmalade (home-made) ..	Informal	Deficient of 8 per cent of the necessary soluble solids	Maker cautioned by M.O.H.
S380	Sugar	Private	Contained 5.8 per cent of potash alum	Reported to Health Committee
S381	Meat Pie	Private	Contained a piece of white cotton thread	Makers cautioned by M.O.H. Every precaution being taken to prevent recurrence of this trouble
S382	Clotted Cream	Private	Contained foreign material—fragments of paraffin wax	Vendor cautioned by M.O.H.
S383	Custard Cream Biscuit ..	Private	Contained coarse fibre, approximately 1½ in. long	Vendor cautioned by M.O.H.
525	Tea	Informal	Packet did not bear the word "Tea": this omission constitutes a contravention of the Labelling of Food Order	Vendor cautioned by M.O.H. Promised to amend printing on the packet
S384	Weaning Food	Private	Contained insect infestation	Reported to Health Committee
S387	Butter	Private	Butter contained a piece of paper (sweet wrapper)	Canners fined £10
S388	Tin of Peas	Private	Tin of peas containing a foreign body—a baby newt	Fined £10 on each of two charges
S389	Bread Rolls	Private	Bread rolls contaminated with rodent excrement	

TABLE D(a)—continued

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
S390	Canned Tuna Fish	Private	Tuna fish containing two dead flies	Vendor exchanged tin. Matter reported to Health Committee
S391	Butter ..	Private	Rancid taste	Reported to Health Committee
S392	Brown Bread ..	Private	Bread containing a small piece of foreign matter (probably twine from flour bag)	Reported to Health Committee
S395	Bottle of Beer ..	Private	Bottle of "Light Ale" containing a floating mould growth	Minor offence—no further action
S396	Meat Pie ..	Private	Meat Pie containing a superficial mould growth	Brewers cautioned by M.O.H.
S398	Bread ..	Private	Bread containing foreign matter—gelatinised starchy material; grease and iron particles	Reported to Health Committee: doubt whether any offence committed by vendor
S400	Brown Bread ..	Private	Bread containing "black pellets" identified as rodent excrement	Bakery inspected. Every possible measure being taken to ensure no further occurrence of this nature
S403	Chocolate Swiss Roll	Private	Roll contained insect remains	Vendor cautioned by M.O.H.
S404	Grapefruit Drink ..	Private	Contained several small pieces of a dark-coloured woody tissue	Distributors cautioned; matter being thoroughly investigated by them
I733	Family Tart (Raspberry)	Informal	Genuine Raspberry Jam Tart with a misleading label	Wholesalers promised to amend label
S406	Bottle of Beer ..	Private	"Brown Ale" containing a floating mould growth	Distributors cautioned by M.O.H.
S407	"Nutrex" Sliced White Bread	Private	Contained foreign material—gelatinised starchy matter with associated dirt	Bakery inspected. Management cautioned

TABLE D(a)—continued

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
S411	Cream Puffs ..	Private	Contained a mould growth	Baker cautioned and bakery visited. Firm in process of change of ownership ; inexperienced staff dealing with packing on day of this delivery Manufacturer cautioned. All necessary precautions will be taken to prevent a recurrence of offence Remainder of stock sampled and examined
S412	Minced Chicken ..	Private	Contained a portion of inedible material (fragment of a small feather)	
S413	Pineapple Pieces ..	Private	Contained 850 parts per million tin. Certified as grossly in excess of the recommended limit, rendering the sample inedible	
2406	Currants ..	Informal	Normal and satisfactory sample, but sold in a bag incorrectly labelled "sugar"	Doubt as to whether the misleading labelling constituted an offence under the Labelling of Food Order, 1953
2412	Sultanas ..	Informal	Normal and satisfactory sample, but sold in a bag incorrectly labelled "sugar"	
1764	Mussels ..	Informal	Only 30 per cent clean	
1769	Mussels ..	Informal	Only 30 per cent clean	Reported to Fisheries Experimental Station Supplier and Local M.O.H. cautioned by Leicester M.O.H.
1774	Mussels ..	Informal	Only 50 per cent clean	
S415	Brown Bread ..	Private	Dough was incompletely mixed ; nodule of malt flour in the centre of the crumb	
S417	Chocolate Biscuit ..	Private	Portion of chocolate biscuit containing human hair	Manufacturer cautioned

TABLE D(b). Drug Samples reported 'Not Genuine'

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
i15	Cod Liver Oil ..	Informal	Deficient of 10.3 per cent of the required minimum Vitamin A content	Formal follow-up sample No. 2116 taken
2116	Cod Liver Oil ..	Formal	Deficient of 13.6 per cent of the required minimum Vitamin A content	Remaining stock surrendered
1402	"Gluko Juice" .. Blackcurrant Drink	Informal	Genuine "Gluko Juice Blackcurrant Drink" bearing a misleading label	Manufacturer cautioned by Town Clerk
1513	Stabilised Calcium Aspirin ..	Informal	Presence of 11.3 per cent free acetic acid suggests a considerable degree of hydrolysis of the calcium acetylsalicylate. Probably very old stock which had deteriorated on storage	
1547	"Magnesia" ..	Informal	Sample of Light Magnesium Carbonate B.P. incorrectly described on vendor's label as "Magnesia"	Vendor cautioned by M.O.H. Promised to instruct staff to be more careful with labelling of drugs in future

TABLE D(b)—continued

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
1553	"Carbonate of Magnesia" ..	Informal	Sample of Light Magnesium Carbonate incorrectly described on vendor's label as "Carbonate of Magnesia"	Vendor cautioned by M.O.H. Promised to correct labelling
1609	Soda Mint Tablets ..	Informal	Satisfactory sample of Soda Mint Tablets presented for sale in a bag labelled "Cherry Cough Pastilles". Pharmaceutically unethical	All vendors cautioned by M.O.H.
1610	Soda Mint Tablets ..	Informal	Satisfactory sample of soda Mint Tablets presented for sale in an unlabelled bag	Letter sent to Local Pharmaceutical Society; Secretary promised to notify all local members and to ask Headquarters to insert a notice in the <i>Pharmaceutical Journal</i> re necessity for tablets to be suitably labelled
1611	Soda Mint Tablets ..	Informal	Satisfactory sample of Soda Mint Tablets presented for sale in an unlabelled bag	
1613	Soda Mint Tablets ..	Informal	Satisfactory sample of Soda Mint Tablets presented for sale in an unlabelled bag	

TABLE D(b)—continued

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
1616	Glauber's Salt ..	Informal	Loss on drying at 105°C only 29 per cent. B.P. states that loss should be not less than 51.5 per cent and not more than 57.0 per cent	
1942	Calcium Lactate Tablets ..	Informal	Ninety-five tablets were Calcium Lactate Tablets not of the substance demanded	Cautioned by M.O.H.
2058	Sulphur Tablets ..	Informal	Tablets satisfactory. Description and dosage printed on carton should be more specifically defined	Cautioned by M.O.H.
2585	Cough Mixture ..	Informal	Deficient of approximately 94 per cent of the expected Aq. Chloroform B.P. content	Manufacturer furnished an acceptable explanation
2683	Solution of Hydrogen Peroxide B.P.	Informal	Satisfactory Hydrogen Peroxide content but low acidity which would probably adversely effect the keeping quality of the sample	Manufacturer furnished an acceptable explanation
2144	Bronchial and Cold Mixture..	Formal	Deficient of approximately 96 per cent of the expected Aq. Chloroform B.P. content. (Follow-up of Informal Sample No. 2585)	Manufacturer furnished an acceptable explanation

TABLE E
Results of Bacteriological Examination of Milk, 1958
Examined under Milk (Special Designation) Regulations

Grade	Total No. examined	Total Test Void	Passed as satis- factory	No. which failed Me. Blue Test	More than 2.3 L.B.U.	% Satisfactory		
						1956	1957	1958
Tuberculin Tested (Farm Bottled) ..	18	—	15	3	—	91.5	90.2	83.3
Tuberculin Tested	715	2	665	48	—	92.0	91.7	93.0
(including 37 Channel Island Milks)								
Tuberculin Tested (Pasteurised) ..	38	—	38	—	—	100.0	97.5	100.0
Tuberculin Tested Channel Islands								
Pasteurised	6	—	6	—	—	100.0	100.0	100.0
Pasteurised	265	1	264	—	—	100.0	99.7	99.6
School Milk (Pasteurised) ..	67	—	67	—	—	100.0	100.0	100.0
Sterilised	104	—	104	—	—	100.0	100.0	100.0
Totals	1,213	3	1,159	51	—	95.8	94.7	95.8

TABLE F. Swimming Bath Waters Examined during 1958

Bath	Number Examined	Number having satisfactory bacteriological quality	B. Coli too numerous or total count more than 1,000 per ml.	Number in which Chlorine dose was of higher concentration than desirable	Number in which Chlorine dose was of lower concentration than desirable	Number in which pH was too low	% passed as bacteriologically satisfactory
Aylestone	22	22	-	2	1	1	100
Cossington Street ..	10	10	-	1	-	-	100
Spence Street ..	11	11	-	1	1	-	100
Vestry Street ..	40	40	-	2	-	-	100
Wyggeston Boys School ..	8	7	1	-	5	-	88
TOTAL (Corporation Baths)	91	90	1	6	7	1	99
Humberstone Lido ..	19	19	-	-	1	5	100
Kenwood Pool ..	22	22	-	-	1	-	100
TOTAL (All Baths)	132	131	1	6	9	6	99

**TABLE G. Fertilisers and Feeding Stuffs Analysed in connection with
the Fertilisers and Feeding Stuffs Act during 1958**

Sample	Number examined	Number Satis- factory	Number Unsatisfactory		
			Compo- sition Incorrect	Statutory Declara- tion Defective	Total Unsatis- factory
Fertilisers :					
Basic Slag	1	—	1	—	1
Blood and Bone Fertiliser ..	1	1	—	—	—
Bone Meal	2	1	—	1	1
Chrysanthemum Fertilisers	3	3	—	—	—
Dried Blood	2	2	—	—	—
Garden Fertiliser	1	1	—	—	—
General Fertiliser	1	1	—	—	—
Growmore Fertiliser	3	2	—	1	1
Hoof and Horn Meal	1	1	—	—	—
Hop Manure	1	1	—	—	—
Hydrated Lime (Pure)	1	1	—	—	—
Hydrated Garden Lime	3	3	—	—	—
Lawn Conditioner	1	1	—	—	—
Lawn Fertiliser	2	—	2	—	2
Lush Soluble Fertiliser	1	1	—	—	—
One Week Fertiliser	1	1	—	—	—
Rootols	1	1	—	—	—
Sangral Fertiliser	1	1	—	—	—
Soluble Blood	1	1	—	—	—
Solufeed	1	1	—	—	—
Sulphate of Ammonia	2	2	—	—	—
Sulphate of Potash	4	4	—	—	—
Superphosphate of Lime	2	1	1	—	1
Tomato Fertiliser	1	1	—	—	—
Feeding Stuffs :					
Baby Chick Mash	1	1	—	—	—
Battery Mash	1	1	—	—	—
Dairy Nuts	1	1	—	—	—
Hen Battery and Deep Litter Mash	1	1	—	—	—
High Protein Intensive Layers' Mash	1	1	—	—	—
Hi-Pro Dairy Nuts	2	—	2	—	2
Hi-Yield Dairy Nuts	1	1	—	—	—
Layers' Mash	1	1	—	—	—
Poultry Grain Balancer Mash	3	1	2	—	2
Sow and Weaner Meal	1	1	—	—	—
Super Layers' Mash	1	1	—	—	—
Total	52	42	8	2	10
Private Samples					
Fertilisers and Feeding Stuffs :					
Coarse Dairy Meal	3	3	—	—	—
"Fertiliser"	1	1	—	—	—
Fish Meal	1	1	—	—	—
Hen Battery Mash	2	2	—	—	—
Mushroom Compost	1	1	—	—	—
Pig Meal	5	5	—	—	—
Poultry Grain Balancer Mash	1	1	—	—	—
Sow and Weaner Meal	5	5	—	—	—
Total	19	19	—	—	—

TABLE H

**Miscellaneous Samples examined for various
Corporation Committees**

Health Department			Central Purchasing Office		
Atmospheric Pollution Investigation :			Anti-freeze	1	
Lead Peroxide Cylinders	58		Dried Milk	2	
Rain Waters ..	33		Fat (Cooking).. ..	1	
	—	91	Hypochlorite	2	
				—	6
Waters :			Fire Service		
Bacteriological ..	2		Brake and Clutch Fluid..	1	
Chemical	5			—	1
	—	7			
Miscellaneous :			Housing Department		
Air Samples ..	2		Paint Film	1	
Atmospheric Deposits	2			—	1
Bath Waters ..	133		Maternity and Child Welfare		
Chloros	3		Breast Milk	2	
Daily City Water			Urine	2	
Supply	254			—	4
Domestos	1		School Meals Service		
Grit Samples ..	2		Custard	1	
Milk	1		Custard Powder	1	
Ostermilk	1		Dried Milk Powder ..	1	
Phosphatase Milks	1,253			—	3
Rag Flocks ..	3				
Sand Samples ..	12		Total	1,780	
	—	1,667			

TABLE I

Miscellaneous Samples submitted privately by the public

Article	No.	Article	No.
Foods, Drugs and Beverages :		Miscellaneous :	
Beetroot in Jelly	1	Feeding Stuffs	17
Brandy	1	Fertilisers	2
Cheese	2	Flue Deposits	2
Icing	1	Grit Samples	2
Flour	3	Hair-waving Preparation ..	1
Milk	1	Oil Samples	3
Orange Squash	5	"Osmotas"	2
Pork Sausages	3	Petrol	1
Potatoes	6	Sediment from Vacuum Pump	1
Red Flu Mixture	1	Sewage Samples	4
Tuna (Canned)	1	Solvent	1
Whisky	1	Tablets	1
Miscellaneous :		Water/Oil Mixture	1
Bitumen Cold Mix	1	Waters (Bacteriological) ..	19
Boiler Waters	2	Waters (Chemical)	30
Carton	1		—
Deposit	1	Total	118
			—

TABLE J

**Samples submitted by Members of the Public under
Food and Drugs Act**

Article	No.	Article	No.
Baby Food	2	Jam	1
Beer	1	Meat Pies	2
Biscuits	2	Milk	1
Bread	4	Peas (Tinned)	2
Bread (Brown)	4	Pineapple (Tinned)	1
Brown Ale	1	Salmon (Tinned)	1
Butter	3	Sausage (Tinned)	1
Chicken (Minced)	1	Sugar	2
Confectionery	5	Tuna (Tinned)	1
Cream	1		—
Fruit Loaf	1	Total	39
Grapefruit Drink	1		—
Groats	1		

TABLE K

**Summary of Samples examined by Bacteriological Methods
during 1958**

Milk	1,146
Pasteurised Milk supplied to Schools	67
Washed Milk Bottles (Estimation of Cleanliness)	247
Reservoir and other Waters (for Water Committee)	1,627
Waters (for Health Committee)	2
Waters (for daily examination of the domestic water supply)	254
Swimming Bath Waters	133
Miscellaneous	19
Shellfish	18

TABLE L
Samples of Milk examined by the Phosphatase Test, 1958

	Dairy	No. Examined	No. giving less than 2.3 Blue Units : Efficient Pasteurisation	% of Total Satisfactory, 1958	% Satisfactory in previous years		
					1957	1956	1955
No. 1	..	249	249	100.0	100.0	100.0	99.6
No. 2	..	251	251	100.0	100.0	100.0	100.0
No. 3	..	251	251	100.0	100.0	100.0	100.0
No. 4	..	251	251	100.0	100.0	100.0	100.0
No. 5	..	251	250	99.6	100.0	100.0	99.6
Miscellaneous (mainly samples submitted for Bacteriological Tests)	..	104	104	100.0	100.0	100.0	100.0
Totals	..	1,357	1,356	99.9	100.0	100.0	99.8

TABLE N
Ice Cream Samples

Year	Fat Average %	Milk Solids Average %	Sucrose Average %	Total Solids Average %	No. of samples examined
1951 ..	9.3	10.6	13.2	—	167
1952 ..	8.8	8.8	13.0	—	110
1953 ..	8.8	9.4	10.4	—	216
1954 ..	8.7	10.5	14.4	—	77
1955 ..	9.1	10.8	13.5	—	66
1956 ..	9.8	11.7	12.7	—	51
1957 ..	9.5	11.3	13.4	—	49
1958 ..	9.4	11.2	—	35.1	45

TABLE O
Atmospheric Pollution
Lead Peroxide method for Sulphur Dioxide
Average monthly figures

	Station			
Month	Town Hall	Western Park	Westcotes	Cown Hills
January ..	4.0	1.6	2.2	2.3
February ..	3.4	1.5	1.7	2.2
March ..	3.1	1.4	1.6	1.9
April ..	2.3	1.1	1.4	} Apparatus Stolen
May ..	1.5	0.6	0.7	
June ..	1.2	0.5	0.6	
July ..	0.9	0.5	0.4	
August ..	0.7	0.3	0.35	0.25
September ..	1.0	0.45	0.3	0.25
October ..	2.7	0.7	1.0	0.9
November ..	2.8	1.6	1.6	1.3
December ..	3.4	1.4	2.0	1.2

(Results expressed in mgms. SO₃ per 100 sq. cm. per day)

TABLE P. Atmospheric Pollution
Figures obtained from Standard Deposit Gauge

Site of Gauge	Year	Average Monthly Rainfall Inches	Average Deposit in tons per square mile per month					Soluble Deposit	Total Deposit
			Insoluble Deposit						
			Tar	Soot	Ash	Total			
Town Hall Roof	1942	1.76	0.15	4.02	17.25	21.42	7.05	28.47	
	1943	1.72	0.13	3.63	17.19	20.95	6.63	27.58	
	1944	2.39	0.12	3.65	15.45	19.22	6.29	25.51	
	1945	1.79	0.19	3.80	13.56	17.55	6.18	23.73	
	1946	2.73	0.33	3.57	11.81	15.71	6.66	22.37	
	1947	1.80	0.25	2.94	9.06	12.25	5.75	18.00	
	1948	2.19	0.19	4.96	9.13	14.28	5.46	19.74	
	1949	1.92	0.26	4.89	9.94	15.09	5.91	21.00	
	1950	2.00	0.33	5.09	16.22	21.64	8.44	30.08	
	1951	2.50	0.27	4.33	17.94	22.54	10.22	32.76	
	1952	1.98	0.27	3.71	15.33	19.31	7.41	26.72	
	1953	1.77	0.28	4.50	12.07	16.85	8.68	25.53	
	1954	2.62	0.19	5.12	11.29	16.60	8.17	24.77	
	1955	1.88	0.10	3.52	8.15	11.77	6.67	18.44	
	1956	2.07	0.14	3.78	9.13	13.05	7.16	20.21	
	1957	2.26	0.13	3.81	8.35	12.29	7.18	19.47	
	1958	2.25	0.12	3.59	8.02	11.73	6.64	18.37	
Average for 17 years		2.10	0.20	4.05	12.35	16.60	7.09	23.69	
Crown Hills .	1958*	2.38	0.06	3.06	66.8	9.80	6.51	16.31	
Western Park .	1958	2.11	0.03	1.08	2.45	3.56	3.58	7.14	

*Please note : Figures for Crown Hills are for 9 months only. Apparatus was stolen during April and new equipment installed July 1st.

TABLE Q

ATMOSPHERIC POLLUTION

Average monthly results for readings taken during 1958

SMOKE

(Results expressed in mgms. per 100 cubic metres of air)

Month 1958	Belgrave	Crown Hills	Saffron Hill	Western Park	Grey Friars
January ..	25	22	18	16	41
February ..	9	4	8	6	9
March ..	8	7	10	8	9
April ..	5	5	7	4	8
May ..	2	2	2	2	4
June ..	2	2	2	2	5
July ..	2	1	2	1	4
August ..	2	1	2	1	4
September	3	2	3	2	6
October ..	10	8	7	7	13
November ..	13	21	21	20	27
December ..	23	22	20	18	26
Monthly Average	10	8	9	7	13

TABLE R
ATMOSPHERIC POLLUTION
Average monthly results for readings taken during 1958
SULPHUR DIOXIDE
(Volumetric Method)
(Results expressed in parts per 100 million parts of air v/v)

Month 1958	Belgrave	Crown Hills	Saffron Hill	Western Park	Grey Friars
January ..	7.2	5.1	4.5	5.3	15.1
February ..	4.3	3.8	3.2	3.6	10.9
March ..	4.2	4.1	4.6	5.0	12.1
April ..	3.8	4.1	4.3	3.6	10.0
May ..	2.6	2.1	1.7	1.8	4.4
June ..	2.7	2.2	1.8	2.2	4.3
July ..	1.8	1.8	1.6	2.0	3.7
August ..	1.7	1.2	1.3	1.4	3.1
September	2.3	1.7	2.0	2.5	4.8
October ..	4.8	3.7	3.2	3.6	10.0
November ..	7.2	6.8	6.8	7.1	16.7
December ..	7.4	7.0	5.4	6.4	16.3
Monthly Average	4.2	3.6	3.4	3.7	9.3

TABLE W

Samples Submitted by the Water Department

Routine Samples

Waters (Chemical)	..	..	..	..	..	1,705
Waters (Bacteriological)	..	..	..	..	..	1,627
Waters (Biological)	..	..	..	..	..	189

Special Samples

Alum Solution (used in water treatment)	154
---	----	----	----	----	-----

Miscellaneous Samples ..

Alum (used for coagulation experiments in the laboratory)	..	..	1
Brick Samples (submitted for efflorescence test)	..	..	1
Calgon (investigation into use of Calgon to prevent blocking of pipe carrying sodium aluminate solution)	..	..	1
Chloros (for determination of residual chlorine)	..	..	1
Coil from plumber's hand-lamp (request for method of cleaning)	..		1
Copperas (analysed for the River Dove Water Board)	..	..	1
Decanter (submitted in connection with a complaint of "stale" water)	..		1
Deposit Samples (taken from pipes, storage tanks, etc.)	..	..	8
Ferrous Sulphate Sludge (moisture content required)	..	..	1
Formica Samples (tested for suitability for laboratory benches)	..		2
Insect Lava (present in a storage tank)	..	..	1
Jointing Paste for use with Tyton joint (submitted to check if toxic materials were present)	..	..	1
Lead Sample (comment on its malleability required)	..	..	1
Lime Sample (used for experimental work in the laboratory)	..		1
Road Material (query as to suitability for surrounding water main)	..		2
Sand Samples (submitted for determination of manganese content ; suitability for filter shells, building construction, etc.)	..	..	13
Sludge Samples (query as to manganese present)	..	..	2
Soda Ash Sample (used for experimental work in the laboratory)	..		1
Sodium aluminate (used for coagulation experiments in the laboratory)			2
Soil Samples (submitted for estimation of sulphate)	..	..	18
Tap Washer (tested for sterility)	..	..	1
Tile Samples (query as to whether copperas was likely to stain the tiles)			2
Total	..	..	3,738

Report on the Public Health and Food Inspection Department for the year 1958

by

G. A. HILLER, F.R.S.H., F.A.P.H.I.
Chief Public Health Inspector

In presenting my Report on the work of the Public Health Inspectors during 1958, I am very pleased to be able to say that the improved staffing position has been maintained, mainly through the pupil training scheme which was first embarked upon in 1954.

Slum Clearance has gone ahead according to the Council's plan, food hygiene has been further improved, a determined effort has been made to prevent any sort of permanent van-dwelling in the city and new ground has been broken in an endeavour to bring about a cleaner atmosphere in Leicester. In September the Council accepted a fifteen-year programme of Smoke Control Areas involving over thirty-four thousand premises, and this was followed during November and December by a special exhibition on the subject of clean air.

I should like to thank the Chairman and Members of the Health Committee and Dr. Macdonald for their help and encouragement during the year, and to say a special word of thanks to all my colleagues, particularly for their enthusiasm and helpfulness during the Clean Air Exhibition.

STAFF

The establishment is made up as follows :

1 Chief Public Health Inspector

1 Deputy Chief Public Health Inspector

- 14 Specialist Inspectors :
 - 5 Meat Inspection
 - 4 Housing (Slum Clearance)
 - 1 Cafés and Restaurants
 - 1 Food and Drugs Sampling
 - 2 Smoke Abatement
 - 1 Senior District Inspector
- 16 District Inspectors (4 vacancies)
 - 1 Food Hygiene Assistant (female)
- 10 Pupil Inspectors (1 vacancy)
 - 1 Chief Clerk
 - 7 Clerks
 - 1 Rodent Officer
 - 4 Rodent Operators
 - 5 Sanitary Assistants
 - 1 Abattoir Assistant

GENERAL SANITARY CIRCUMSTANCES

Complaints

The following complaints were received and investigated :

Housing Defects	..	..	..	..	970
Choked and Defective Drains	..	..	..	..	170
Water Supply—Defective or Insufficient	..	..	..	..	13
Flood Water in Houses	..	..	..	..	23
Overcrowding	..	..	..	..	227
Keeping of Animals	..	..	..	..	37
Accumulations of Offensive Matter	..	..	..	..	71
Factory Conditions (Sanitation)	..	..	..	..	120
Smoke Nuisances	..	..	..	..	70
Noise Nuisances	..	..	..	..	42

Infestations :

(a) Insect Pests	..	..	..	..	240
(b) Rats and Mice	..	..	..	..	1,020
Miscellaneous	..	..	..	..	185
Total	..	..	..	..	<u>3,188</u>

SYNOPSIS OF INSPECTION WORK

	Inspections
Dwelling Houses :	
For Housing Defects under Public Health Act ..	2,334
Under Housing Acts—	
Overcrowding	272
Inspections	2,058
Clearance Area Inspections	1,086
Certificates of Disrepair	396
Dangerous Structures	51
Meetings with Owners or Tradesmen	931
Drainage—	
Tests and Inspections	617
Infected Dwelling Houses—	
Infectious Disease Enquiries	334
Common Lodging Houses	28
Houses-Let-in-Lodgings	113
Canal Boats	6
Van Dwellings	595
Industrial Premises :	
Factories	206
Noise Nuisances	213
Smoke Abatement :	
Smoke Observations	382
Visits re Smoke, Industrial, Smoke Control Areas, etc.	1,889
Shops Act, 1950—Section 38	22
Hairdressers' Premises	73
Nuisances :	
Offensive Accumulations	93
Offensive Trade Premises	13
Keeping of Animals, Poultry, Swine, etc.	98
Tips (Refuse)	22
Ditches and Watercourses	24
Verminous Premises	375
Food :	
Inspections for Supervision of Food—	
Slaughterhouses and Cold Stores	1,252
Food Warehouses	2,654
Markets—Retail Fish	235
Retail Provision	203
Wholesale Fish	257
Wholesale Fruit and Vegetables	270
Carried forward	17,102

				Inspections
Brought forward	..	..	..	17,102
School Kitchens	..	..	..	27
Dairies	..	..	..	244
Food Hygiene Regulations, 1955 :				
Bakehouses	..	..	..	62
Fish Frying Premises	..	..	..	24
Food Manufacturing Premises	..	..	..	44
Food Vendors' Vehicles	..	..	..	184
Hotel and Restaurant Kitchens	..	..	..	1,048
Shops—Fish, Grocers and Greengrocers, etc.	..	..	..	925
Food and Drugs Act, 1955—Section 16 :				
Ice Cream Premises	..	..	..	361
Sampling Visits :				
Foodstuffs, Water, Rag Flocks, etc.	..	..	..	1,196
Merchandise Marks Act	..	..	..	121
Agricultural Produce (Grading and Marking) Act	..	..	..	7
Pet Animals Act, 1951 :				
Shop Premises	..	..	..	41
Total	..	..	..	21,386
Re-inspections	..	..	..	14,175
Grand Total	..	..	..	35,561
Notices—Served—Informal	..	..	..	1,373
Formal	..	..	..	112
Complied with —Informal	..	..	..	1,880*
Formal	..	..	..	90

*(Includes 624 notices served in previous years)

Drainage, Sanitation and Water Supply

Apart from the existence of extensive disrepair and dampness, many houses in Leicester have no separate internal water supply and have water closets which are shared, generally on the basis of one water closet to two and sometimes to three or four houses.

Fortunately the majority of such houses are included in the first two categories of the Department's slum clearance survey which was carried out in 1949-50.

Since the post-war slum clearance schemes were started in 1953 progress in the demolition of houses lacking in separate water supplies

and separate water closets has been very considerable and in 1958, 449 houses sharing water closets and 246 houses without internal water supply were dealt with.

The general improvements in the sanitary circumstances of the city is further reflected in the fact that the number of known cesspools and pail closets was reduced during the year to 57 and 53 respectively.

Swimming Pools

During the year regular visits were made to the four public baths and samples of the water taken at the time of inspection.

The two public open-air pools which are privately owned and the pool at the Wyggeston Boys' School were also inspected and samples taken when they were in use.

Whilst only one sample was reported unsatisfactory bacteriologically, in several instances over-chlorination had taken place and others had too high an acid value. In these cases after advisory action by this Department satisfactory samples were obtained.

Number of samples taken :				Satisfactory	Unsatisfactory
Corporation Baths	..	91		91	—
Private Pools	..	41		40	1
		—		—	—
Total	..	132		131	1
		—		—	—

Disinfection and Disinfestation

The work done by the disinfecting and disinfestation staff is shown in the following Table :

Houses disinfected	..	..	..	..	417
Houses disinfested	..	..	..	..	1,268
Bedding, clothing, etc., steam-treated			..	..	452
Articles disinfected prior to export..			..	..	309

Periodical fumigation of flour mills is supervised by the Public Health Inspectors.

Common Lodging House

Frequent inspections of the one Common Lodging House in Leicester are made including night visits. The accommodation is for male persons only and is used seasonally. The house is registered for 88 beds and recently of the 73 occupants counted at night, 35 were residents of some years standing. Together with the beds for casuals at Hillcrest (Welfare

Department) Institution, there seems to be sufficient accommodation of this type to meet the needs of the city.

Movable Dwellings

Once again a great deal of work has had to be done in order to ensure that the city does not become a semi-permanent “squatting ground” for van dwellers. Caravaners have been found on 29 unauthorised sites and in order to get them cleared 1,378 visits had to be made. Under the Leicester Corporation Act, 1956, van dwellers can be prosecuted for :

- (1) Being on land without permission where a notice to that effect is displayed.
- (2) Being on an unlicensed site for 14 days continuously or, 28 days in one year on any unlicensed land anywhere in the city.

The occupier of such land can be prosecuted for knowingly allowing the occupation of unlicensed land.

Legal proceedings instituted resulted as shown in the accompanying Table :

Case No.	Address of Contravention	Reason	Result
1	Court D, Northgate Street	In city more than 28 days	£1 fine
2	Rushey Fields ..	On Corporation land without consent	£1 10s. and 10s. fine
3	Crane Street, .. George Street, Royal East Street Rushey Fields	Keeping caravan on land in excess of 28 days	£5 fine in absence
4	Willow Street ..	Keeping caravan on land in excess of 28 days	£5 fine in absence
5	Willow Street ..	Keeping caravan on land in excess of 28 days	£10 fine with 10 weeks to pay
6	Navigation Street, Burgess Street, Crane Street, Swan Street, Warrington Street	Keeping caravan on land in excess of 28 days	£1 fine
7	Brunswick Street, Willow Street, Crane Street, Rushey Fields, Loughborough Road, Navigation Street	Keeping caravan on land in excess of 28 days	£1 fine

Case No.	Address of Contravention	Reason	Result
8	Brunswick Street, Court D, Northgate Street	Keeping caravan on land in excess of 28 days	£1 fine
9	Carlton Avenue Court D, Northgate Street	Keeping caravan on land in excess of 28 days	£1 fine
10	Land—Middleton Street	Allowing land to be used for camping purposes in excess of 28 days	£5 fine
11	Land—Middleton Street	Allowing continued use of land for camping purposes	£5 fine in each of two instances

Showmen's Guild Site

The site used as winter quarters was again well conducted and gave no cause for complaint.

Knackers' Yards

There is only one Knacker's Yard in Leicester and it has been well conducted during the year.

Offensive Trades

The registered offensive trades are as shown below :

Tripe Dressers	..	..	..	6
Marine Store Dealers	..	..	..	8

Pet Shops

There are 30 shops covered by licences under the Pet Animals Act, 1951, and 88 visits were made. The licensing conditions have been observed in all cases although some difficulty has been experienced in satisfying the requirements that means must be available for giving access to the premises in emergency.

Sale of Animal Feeding Meat

Seventeen shops have been registered with this authority since the Byelaws came into force on 1st January of this year and 21 visits have been made. The Byelaws relate to hygienic storing and handling of raw meal and to the keeping of records of purchases and sales.

Factories

The number of registered factories and the inspections made are shown in the following Tables. It will be seen that the number of factories without mechanical power is very small these days and that greater attention has had to be given to places such as building sites where, often, sanitary accommodation is inadequate.

OBSERVATIONS ON THE ADMINISTRATION OF THE FACTORIES ACT, 1937 and 1948

PART I OF THE ACT

1.—INSPECTIONS for purposes of provisions as to health (inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of		
		Inspections and Re-Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authority	78	—	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	2,025	372	29	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority* (excluding out-workers' premises)	—	92	11	—
Total	2,103	464	40	—

*i.e., Electrical Stations (Section 103(1)), Institutions (Section 104) and sites of Building Operations and Works of Engineering Construction (Sections 107 and 108).

2.—Cases in which DEFECTS were found

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	To H.M. Inspector (4)	Referred By H.M. Inspector (5)	
Want of cleanliness (S.1) ..	4	4	—	4	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable temperature (S.3) ..	—	—	—	—	—
Inadequate ventilation (S.4) ..	—	—	—	—	—
Ineffective drainage of floors (S.6) ..	—	—	—	—	—
Sanitary Conveniences (S.7) :					
(a) insufficient ..	84	54	—	83	—
(b) unsuitable or defective ..	33	34	—	29	—
(c) not separate for sexes ..	3	1	—	3	—
Other offences against the Act (not including offences relating to Outwork) ..	—	—	—	—	—
Total ..	124	*93	—	119	—

(*This total includes 16 notices served in previous years but complied with in 1958).

It will be seen that the number of inspections falls far short of the number of registered factories ; this is due to continued staff shortage which means that most of the inspections are carried out on receipt of complaints.

OUTWORK (Sections 110 and 111)

Total number of outworkers in August, 1958, was as shown below :

Wearing Apparel, Making, etc. ..	..	1,047
Umbrellas, etc. .. ..	..	10
		<hr/>
Total .. ..	..	1,057
		<hr/>

Inspections of households in which outwork is carried on have been limited to visits in connection with complaints of housing defects, slum clearance survey visits and investigation of cases of infectious disease.

ATMOSPHERIC POLLUTION

Industrial Smoke

Much work has been done by visits to boiler houses to establish contact with engineers and others who are in a position to control smoke emissions from boiler plant and furnaces.

Smoke and Grit Nuisances Abated

The following are examples of work done on industrial smoke and fume emission :

1. A hosiery boiler house from which serious smoke emission had arisen was rebuilt and a new Treble Press Economic Boiler, equipped with instruments and automatic stoking apparatus, was installed ; no further complaints have been received.

2. A rubber manufacturing company installed smoke density recording and alarm equipment to assist in the efficient operation of the boiler plant.

3. A plating specialist firm replaced existing fume ducts and fans to give a better dispersal position and eliminated a source of serious fume trouble.

4. A biscuit manufacturing firm installed grit-arresting equipment and eliminated a serious grit nuisance.

5. A residential hotel in the City Centre installed secondary air fan equipment to two Cornish boilers and reduced smoke emissions to satisfactory levels.

Complaints of smoke and grit	..	..	70
Smoke observations	..	..	382
Grit Plate Recordings	..	..	54
Re-inspections	..	..	626
Visits to boiler plants	..	..	284

PRIOR APPROVAL

Whilst only four applications for "prior approval" of furnace installations were received during the year, 22 notifications under the Act were received from the City Surveyor's Department in conjunction with deposited plans and all these cases were finally dealt with on much the same basis as "prior approval" applications where appropriate. These, together with a number of notifications regarding chimney heights, were all approved ultimately although in some cases amendments were insisted upon.

Non-Industrial Smoke

In September the City Council approved a 15-year programme of smoke control areas involving 34,144 premises and it is estimated that the local authority's share of the cost of adaptations will be £142,494. The scheme will be reviewed during 1962 in the hope that all the factors which govern such a project will allow of its being expedited so that it may be completed in 10 to 12 years.

In preparing this programme every endeavour has been made to keep a balance between post-war and pre-war corporation tenants and other householders. In the City Centre regard has had to be paid to the progress made in constructing the Central Ring Road.

The programme is as follows :

Area No.	Year of Survey	Area Name	In force September	Premises			Estimated cost to Local Authority
				Council Houses	Private Dwellings	Other Buildings	
1	1957	St. Matthew's ..	1958	735	—	3	£15
2	1957-8	Central ..	1959	—	17	550	£195
3	1958	Lee Street ..	1960	34	136	260	£1,020
4	1959	{ Churchgate ..	1961	—	110	390	£800
5		{ Aerodrome ..		438	2	14	£54
6		{ Eyres Monsell ..		1,717	200	5	£1,350
7		{ Lutterworth Road ..		—	700	25	£4,200
8	1960	Dane Hills ..	1962	—	1,100	10	£5,000
9	1961	{ New Parks ..	1963	3,380	120	10	£2,150
10		{ Highcross Street ..		—	100	410	£480
			Totals	6,304	2,485	1,677	£15,264
11	1962	{ Braunstone West ..	1964	1,600	—	8	£8,000
12		{ Newarke ..		—	28	152	£180
13	1963	{ Newfoundpool ..	1965	—	2,270	57	£13,620
14		{ St. Matthew's Ext. ..		737	—	17	—
15	1964	Braunstone Central	1966	1,700	—	5	£10,000
16	1965	{ Granby Street ..	1967	—	72	518	£450
17		{ Aylestone ..		—	1,250	50	£7,500
18	1966	{ Aylestone Park ..	1968	—	1,300	36	£9,000
19		{ Braunstone East ..		1,590	430	30	£12,000
			Totals	11,931	7,835	2,550	£76,014
20	1967	{ Regent Road ..	1969	—	428	320	£2,700
21		{ Narborough Road ..		—	1,600	5	£9,000
22	1968	{ West End ..	1970	—	2,243	32	£13,600
23		{ University ..		—	80	18	£480
24	1969	{ Wilberforce Road ..	1971	—	1,400	33	£8,000
25		{ Walnut Street ..		—	1,420	55	£8,200
26	1970	Saffron ..	1972	2,400	—	12	£14,000
27	1971	King Richard's Road ..	1973	—	1,738	44	£10,500
			Grand Totals	14,331	16,744	3,069	£142,494

The St. Matthew's Re-development Area Smoke Control Order came into force on 1st September, and it is pleasing to report that with 183 flats and maisonettes already occupied, no contravention has been found.

A central business and shopping area containing several public buildings is also the subject of a confirmed Smoke Control Order which comes into force on 1st September, 1959.

Fifteen exemptions have been granted subject to the appliances being brought up to the latest developments in mechanical firing. In two cases smoke density alarm and recording installations have been insisted upon.

Clean Air Exhibition

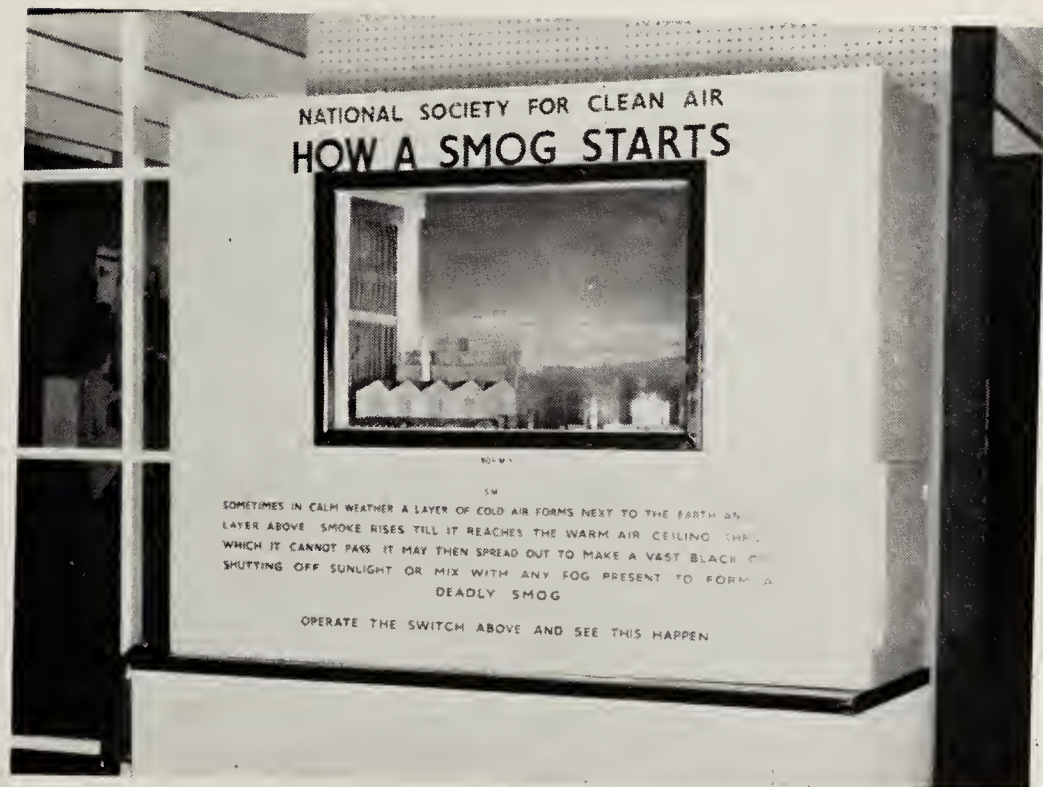
In consequence of the 15-year programme to deal with smoke from domestic and business premises, the Health Committee promoted a Clean Air Exhibition which ran for a little over a fortnight.

The exhibition was staged at the Museum, New Walk, and acknowledgment of this is gladly made to the Museum Committee and to Mr. Walden, the Director ; much valuable help, particularly in the art of display, was given by Mr. Walden's staff.

The following authorities and firms participated :

City Health Inspection Department : Causes and Effects of Air Pollution
City Analyst's Department : Measurement of Pollution
Department of Scientific and Industrial Research (Fuel Research Station)
British Railways
East Midlands Gas Board
East Midlands Electricity Board
B.P.-Shell Ltd. (Oil Burning)
Solid Smokeless Fuels Federation
National Industrial Fuel Efficiency Service
W. C. Holmes & Co. Ltd., Huddersfield : Grit Arrestation
Ashwell & Nesbit Ltd. : Underfeed Mechanical Stokers
Hodgkinsons : Mechanical Stokers
Newton Chambers : Redfyre Emma Coke-Fired Boilers
Vulcan Foundry Ltd. : Clayton Steam Generator
General Electric Co. Ltd. : Smoke Density Alarms
Coal Utilisation Council : Authorised Fuels and Domestic Appliances.

The Committee were fortunate in obtaining the services of The Right Honourable Philip J. Noel-Baker, P.C., M.P., who is well known for his interest in smoke abatement, to open the exhibition. The Lord Mayor (Alderman S. Brown) kindly took the Chair.



S&C SMOKE DENSITY EQUIPMENT



THE CLEAN AIR ACT 1956

UNDER SMOKE EMISSIONS CAN COST YOU £100 IN FINES PER DAY
S&C SMOKE DENSITY WARNING EQUIPMENT WILL PROVIDE A SAFEGUARD WHICH CONFORMS TO
THE APPROPRIATE BRITISH STANDARD SPECIFICATION

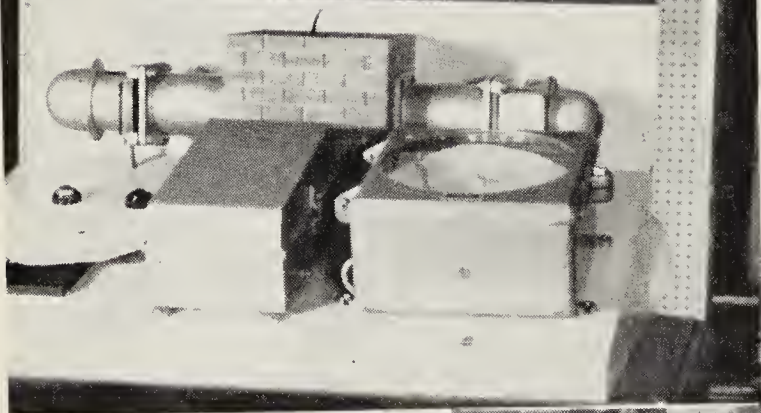
955 2760 1956 S&C SMOKE DENSITY ALARM SP.DEN 150

955 2611 1957 S&C SMOKE DENSITY INDICATOR SP.DEN 170

ALSO GIVES A VISUAL OR AUDIO ALARM OR BOTH WHENEVER EXCESSIVE SMOKE IS BEING MADE
GIVES A CONTINUOUS INDICATION OF THE SMOKE AND WILL GIVE THE SAME ALARM

WE WILL BE PLEASSED TO DISCUSS ANY PROPOSED INSTALLATION WITH YOU

S&C SMOKE DENSITY ALARM



CLEAN AIR EXHIBITION

*Soot encrustation in chimney
taken from house in one of
the city's demolition areas.
This exhibit attracted
great interest.*



Over 9,000 people visited the exhibition and arrangements were made for public health inspectors to conduct parties round the exhibits.

This arrangement was taken advantage of by the following :

- School Parties
- Youth Clubs
- University Students
- Domestic Science College Students
- Townswomen's Guilds
- Young Wives' Groups
- Plant Engineers' Association
- Student Public Health Inspectors (College of Art and Technology).

Films were shown at regular intervals every day and the exhibition was open on three Sunday afternoons.

The Gas Board and the Solid Smokeless Fuels Federation provided mobile exhibition vans which were sited in various parts of the city throughout the period of the exhibition.

A special "Industrialists' Day" was held.

Publicity was obtained through the local Press, posters, bus cards, envelope stamps and the signposting of routes to the exhibition premises by the Automobile Association.

The cost of the venture was about £250.

NOISE NUISANCES

Complaints of noise nuisances	..	..	..	42
,, confirmed	..	..	..	30
,, not confirmed	..	..	..	12
,, abated	..	..	..	29
,, remaining to be dealt with		..	..	1
Total visits made re Noise Nuisances		..	..	213

The Leicester Corporation Act requires that at least three householders shall be aggrieved by any particular noise nuisance before statutory action can be taken and there are the usual "best practical means" defences.

Where the Act cannot be invoked but action is considered to be justified an informal approach is always made and generally the firms are found to be co-operative.

The following are examples of successful action by the inspector :

1. A heavy engineering firm abated a severe noise nuisance during the night hours, by changing programme of process to day-time hours.

2. The noise from a leather-cutting press was reduced by mounting the press on rubber bushes.

3. A hosiery firm agreed to stop extraction fans on the factory frontage during the night hours, thus reducing what had been an irritating noise nuisance to adjacent householders.

4. A hosiery firm equipped steam press exhaust pipes with silencers to reduce noise nuisance.

HOUSING CONDITIONS

From the accompanying Table it will be seen that in 1958, 1,086 houses were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932, and 769 were found to be unfit and were represented in clearance areas. In addition, 27 houses were demolished or closed as being individually unfit for habitation.

Progress annually has been as set out below :

		No. of Houses			
		Representations		Represented	
		C.O.	C.P.O.	In Orders	Confirmed
1953	..	—	1	270	270
1954	..	—	5	670	664
1955	..	—	6	155	123
1956	..	14	7	577	282
1957	..	23	11	1,076	534
1958	..	27	24	769	645

There are now only 12 houses remaining occupied which were dealt with in clearance areas before the war.

Once again over 4,000 enquiries were answered relating to the expectation of life and outstanding repair notices on dwelling houses which were being bought and sold.

RENT ACT, 1957

Applications for Certificates of Disrepair were somewhat less numerous than the period immediately following the date the Rent Act, 1957, became operative :

			1957	1958
Applications received	..	..	549	415
Certificates granted	..	..	91	54
Certificates cancelled	..	..	12	59
Undertakings accepted	..	..	303	292
Applications withdrawn	..	..	14	28

HOUSING STATISTICS

For year ended 31st December, 1958

1.—Unfit Dwelling Houses—Inspection.

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	2,712
(b) Number of inspections made for the purpose	9,268
(2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	1,086
(b) Number of inspections made for the purpose	4,384
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	1,271
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found to be not in all respects reasonably fit for human habitation	1,190

2.—Remedy of Defects without Service of Formal Notices.

Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority or their officers	1,606
---	-------

3.—Action under Statutory Powers.

A—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1957 :

(1) Number of dwelling houses in respect of which notices were served requiring repairs	—
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By owners	—
(b) By Local Authority in default of owners	—

B—Proceedings under Public Health Acts :

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	91
(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
(a) By owners	78
(b) By Local Authority in default of owners	—

C—Proceedings under Section 17 of the Housing Act, 1957 :

(1) Number of dwelling houses in respect of which Demolition Orders were made	35
(2) Number of dwelling houses demolished in pursuance of Demolition Orders	7

D—Proceedings under Section 18 of the Housing Act, 1957 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	—
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—

Number of houses in respect of which Closing Orders were made under Section 17 of the Housing Act, 1957	20
---	----

It will be seen that there is a considerable difference between the number of undertakings accepted since 6th July, 1957 (595), the number of Certificates granted (145) and the number of Certificates cancelled (71).

As Certificates of Disrepair are granted only when the landlord has either failed to carry out his undertaking to do the repairs or to give such an undertaking in the first place, it seems that very many people must have reached a settlement with their landlords and the majority of the undertakings have been carried out.

Quite a number of cases have come to light where landlords have not taken advantage of the Act and in consequence their tenants continue to enjoy the advantages of low rents and in certain other instances the increased rent has been paid and repairs not done within the requisite time.

Difficulties have arisen over ownership of party boundary walls and fences, joint chimney stacks and the reinstatement of gates removed during the scrap metal drive during the war.

The assessment of repairs in relation to the age, character and locality of the houses has not presented any real difficulty.

Subject to availability of staff it should be possible soon to start house-to-house inspections once again.

FOOD

Meat Inspection

The number of slaughterhouses available in Leicester is as follows

Private slaughterhouses at Cattle Market	..	..	13
Other private slaughterhouses	..	..	2
Institutional slaughterhouses	..	..	1

The slaughterhouses owned by the Corporation at the Cattle Market and let to various users continue to cause concern in view of their poor condition which is due mainly to their age ; they were built in 1876.

A special report on their condition was made to the Slaughterhouses (Special) Committee in April.

Once again an increase in the number of animals slaughtered is recorded but I am pleased to be able to say that all the carcasses and their offals were inspected.

It will be realised that working conditions, particularly at the Cattle Market, are very difficult and at times of heavy killing even dangerous, but a tribute should be paid to the inspectors for the way in which they carry out their duties and to the meat traders and slaughtermen for their helpfulness and co-operation.

1958. Total Number of Animals Slaughtered, 174,103, comprising

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Totals
Public Abattoir	15,394	2,487	1,598	71,941	56,897	148,317
Private Slaughterhouses	3,138	145	229	18,696	1,198	23,406
Casualties	178	342	137	612	1,111	2,380
Totals	18,710	2,974	1,964	91,249	59,206	174,103

Carcases Inspected and Condemned. 1958

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	18,710	2,974	1,964	91,249	59,206
Number inspected	18,710	2,974	1,964	91,249	59,206
All Diseases except Tuberculosis and Cysticerci— Whole carcases condemned	17	28	16	89	174
Carcases of which some part or organ condemned ..	2,452	380	1	1,163	1,563
Percentage of the number inspected affected with Disease other than Tuberculosis and Cysticerci ..	13.19	13.72	.87	1.38	2.93
Tuberculosis only— Whole carcases condemned	26	29	4	—	16
Carcases of which some part or organ condemned ..	904	360	—	—	1,004
Percentage of the number inspected affected with Tuberculosis	4.97	13.08	.20	—	1.72
Cysticercosis carcases of which some part or organ was condemned	56	4	—	—	—
Carcases submitted to treatment by refrigeration ..	56	4	—	—	—
Generalised and totally condemned	—	—	—	—	—

Total Weights of Meat Condemned

	English Meat			Imported Meat			English Offal			Imported Offal			Totals		
Cattle Market	T.	C.	Qrs. lbs.	T.	C.	Qrs. lbs.	T.	C.	Qrs. lbs.	T.	C.	Qrs. lbs.	T.	C.	Qrs. lbs.
Slaughterhouses ..	45	11	1 11	-	-	- -	58	5	0 27	-	-	- -	103	16	2 10
Private Slaughterhouses	1	15	3 19	-	-	- -	7	15	3 11	-	-	- -	9	11	3 2
Wholesale Meat Depots	-	-	- -	-	13	0 20	-	-	- -	-	1	2 1	-	14	2 21
Totals ..	47	7	1 2	-	13	0 20	66	1	0 10	-	1	2 1	114	3	0 5

SUMMARY OF FOODSTUFFS CONDEMNED

Tons Cwt. Qrs. lbs.					Other Foodstuffs, etc.	
Fish (excluding					Bacon	.. .. 135 lbs.
Shell Fish) ..					Biscuits	.. .. 35 lbs.
					Bread	.. .. 20 lbs.
					Butter	.. .. 62 lbs.
Shell Fish :					Cake	.. .. 13 lbs.
Mussels ..					Cake Mix	.. .. 17 lbs.
Other Shell Fish					Cereals	.. .. 92 lbs.
					Cheese	.. .. 106 lbs.
					Coffee	.. .. 21 lbs.
Fruit ..					Fish	.. .. 1,268 tins
					Flour	.. .. 186 lbs.
					Fruit	.. .. 8,226 tins
					Fruit (dried)	.. .. 196 lbs.
Meat :					Ice Cream	.. .. 219 blocks
English ..						15 tubs
Imported ..					Ice Lollies	.. .. 350
					Jellies	.. .. 51 lbs.
					Lard	.. .. 79 lbs.
Offal :					Meat	.. .. 3,475 tins
English ..					Meat (cooked)	.. .. 444 lbs.
Imported ..					Milk	.. .. 672 tins
					Nuts	.. .. 5 lbs.
					Oatmeal	.. .. 140 lbs.
Vegetables ..					Sausages	.. .. 325 lbs.
					Seasoning	.. .. 31 lbs.
					Soups	.. .. 4,199 tins
					Suet	.. .. 4 lbs.
					Sugar	.. .. 32 lbs.
Poultry, Game, etc.					Sweets	.. .. 40 lbs.
Chicken and Fowls ..					Tea	.. .. 13 lbs.
Rabbits ..					Vegetables	.. .. 3,057 tins

LEGAL PROCEEDINGS—FOOD

Acts, Byelaws or Regulations under which proceedings were instituted	Default or Offence	Fines			Costs		
		£	s.	d.	£	s.	d.
Food and Drugs Act, 1955	Dead newt in tin of peas ..	10	0	0	—		
Food and Drugs Act, 1955, Sections 2 and 8	Bread rolls containing mice droppings. Sample S.389 Fined £10 on each charge under Sections 2 and 8	20	0	0	15	0	0
Food and Drugs Act, 1955, and Food Hygiene Regulations, 1955	Sale of cheese containing mice droppings. Three charges against Company only Two charges against Company and Manager under Regulations 6, 32(3) and 33, and Regulations 23, 32(1) and 33						
	Company	200	0	0	—		
	Manager	15	0	0	—		

CATERING PREMISES

Routine inspection of catering premises has been continued during the year. Detailed inspection of all factory canteens has been made during the year and the condition of these was found to be varied. Many of these canteens were constructed during the war when materials were difficult to obtain but the standard of cleanliness was found to be generally good. Improvements to premises of low standards are being made gradually and it is pleasing to report that co-operation from the management of the premises concerned is good. One factory discontinued the use of a canteen which was completely unsuitable.

Seven new cafés and snack bars have commenced during the year and two have closed.

Four new canteens for factories were built and opened during the year and plans for rebuilding seven are in an advanced stage of preparation. Improvements to existing canteens are being carried out in a large number of cases.

Two large cafés in the Town Centre have been closed and completely rebuilt before re-opening. Improvements have been effected at several others.

Seven premises where the establishment of food premises was contemplated were inspected and rejected as unsuitable.

The need for good hygienic habits among food handling staffs needs to be continually stressed and talks and discussions with food handlers are a very important part of the work of the staff.

During the year special inspections were carried out under the Food Hygiene Regulations, 1955, of 15 kitchens at private schools. Whilst the standard of cleanliness in nearly all of them was high, two discontinued providing cooked meals on account of the lack of proper facilities for this purpose.

CITY OF LEICESTER CLEAN FOOD GUILD

The following Table shows the number of premises in respect of which Certificates have been awarded by the Guild:

Trade	Applications	Certificates granted
Bakers and Confectioners	20	19
Catering Establishments	25	19
Fishmongers and Fish Fryers ..	13	10
Fruiterers and Greengrocers ..	11	8
Grocers and General Stores ..	151	103
Ice Cream	3	3
Manufactured Meat Products ..	12	9
Retail Butchers	37	23
Sweets	9	8
Licensed Premises	1	1
Totals	282	203

Shops Act (Health and Comfort Provisions)

Premises referred for investigation by Weights and Measures Department	Notices Served		No action required
	Food Hygiene Regulations	Shops Act, Section 38	
6	2	1	3

ICE CREAM

Sixty-two samples were taken for bacteriological examination during the year with the following results :

Prepacked or Loose	Grade I	Grade II	Grade III	Grade IV	Total
Prepacked ..	11	1	—	—	12
Loose	40	5	3	3	51
Total	51	6	3	3	63

Three Grade III samples and one Grade IV sample were obtained from one manufacturer where difficulty was experienced with storage. Investigation made by the officers of this department and the co-operation of the manufacturer concerned resulted in the elimination of the source of contamination and a series of subsequent samples were all Grade I.

Less ice cream is being manufactured in the city by the smaller traders and two discontinued manufacturing.

CHEMICAL ANALYSIS OF ICE CREAM

Thirty-two samples of ice cream were analysed during the year and all were reported as genuine. The fat content of these varied from 5% to 11.5% in loose ice cream and from 9.8% to 12.5% in prepacked ice cream.

MILK AND DAIRIES

The following Table shows the number of licences granted in respect of milk produced and sold under special designations :

MILK (SPECIAL DESIGNATIONS) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949-53 and MILK (SPECIAL DESIGNATIONS) (RAW MILK) REGULATIONS, 1949-54

Dealer's (Pasteuriser's) Licence	..	..	..	5
Dealer's (Steriliser's) Licence	..	..	..	1
Dealer's Licence authorising the sale of "Tuberculin Tested" Milk	..	..	..	51
Dealer's Licence authorising the sale of "Sterilised" Milk	..	..	..	272
Dealer's Licence authorising the sale of "Pasteurised" Milk	..	..	..	268
Dealer's Supplementary Licence authorising the sale of "Pasteurised" Milk	..	..	..	1
Dealer's Supplementary Licence authorising the sale of "Tuberculin Tested" Milk	..	..	..	1
Dealer's Supplementary Licence authorising the sale of "Sterilised" Milk	..	..	..	1

BACTERIOLOGICAL SAMPLING OF MILK, 1958

Milk (Special Designation) (Raw Milk) Regulations, 1949-54

	Number taken					1957	1958
Tuberculin Tested (Raw) Milks—Churn samples ..						833	715
„ „ (Farm bottled) milks—Bottle samples						29	18
						—	—
Total Tuberculin Tested (Raw Milks) ..						862	733
Number which failed Methylene Blue Test as laid down by the Milk (Special Designation) (Raw Milk) Regulations, 1949–54 :							
Churn samples						67	51
Bottle samples						3	Nil
						—	—
Total						70	51
Percentage of failures—Churn samples						8.1%	7.1%
Bottle samples						10.4%	Nil

All the above failures were reported to the Milk Production Officer of the County Agriculture Executive Committee.

The number of raw milks taken from ex-farm supplies was reduced during the year. It was felt that too much emphasis was being placed on milk sampling of this description.

In addition to the sampling carried out by the officers of the County Milk Production Officer's staff in connection with producers' licences for tuberculin tested milk, a large measure of control is obtained by the laboratories of the processing dairies themselves. We are perhaps fortunate in Leicester that the heat-treatment of milk is carried out by two large and three smaller dairies, and all but one of these plants have a control laboratory. In addition there is only one producer-retailer retailing milk in the city, and regular samples taken from this source for bacteriological, biological and chemical examination have all proved satisfactory. The proportion of tuberculin tested ungraded milk from the farms supplying the city continues to increase, and by the early 1960's with the progress of the plans of the Ministry of Agriculture, Fisheries and Food for the eradication of bovine tuberculosis, all milk will be from herds free of that disease and the majority holding a full Tuberculin Tested producers' licence.

No samples of ungraded milk were taken for bacteriological examination during the year. It was felt that after three years of sampling these supplies the original idea of comparing their cleanliness with tuberculin

tested milk had been achieved. The earlier sampling showed that the Methylene Blue Test percentage failure of ungraded milk was practically double that of tuberculin tested supplies.

Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations, 1949-53

	Number taken	1957	1958
Pasteurised Milk (Bottles)		263	265
Tuberculin Tested (Pasteurised) Milk		40	38
Tuberculin Tested (Pasteurised) (Channel Islands) Milk		5	6
Sterilised Milk (Bottles)		88	104
Pasteurised Milk ($\frac{1}{2}$ pints from school supplies) ..		65	67
Total		461	480
Number of Methylene Blue Test Failures ..		nil	nil
Number of Phosphatase Test Failures ..		nil	nil

In addition, daily dairy control samples for pasteurisation efficiency were taken from the five Wholesale Dairies in the city.

	1957	1958
Number taken	1,255	1,253
Number failing Phosphatase Test	nil	1

On investigation it was found that the sample reported as failing the phosphatase test and giving a reading of over 30 Lovibond Blue Units, was in fact raw milk and had been given to the Sampling Officer in error.

The above results show that a high standard of efficiency has been maintained by the heat-treatment dairies in the city during the past year, a standard which reflects credit on both the mechanical efficiency of the equipment and on the skill of the operatives who run and maintain the plants during a working week of seven days.

With the exception of the daily dairy control pasteurisation samples all the above milks were also examined for chemical quality. All were reported as complying with the standard laid down by the Sale of Milk Regulations, 1939, of 3% Milk Fat and 8.5% Solids other than Milk Fat.

Bacteriological Examination of Milk Bottles

Washed bottles were taken from all the dairies in the city during the year and submitted to the Public Analyst for bacteriological examination.

	1957	1958
Number of bottles taken	293	247
Number of unsatisfactory bottles, i.e. more than 600 colonies per bottle	26	12

All the unsatisfactory results were investigated at the dairies concerned and as a result action was taken which produced a satisfactory bottle on further sampling.

During the year the largest dairy in the city installed as part of a modernisation programme two new washers each capable of dealing with 24,000 bottles an hour. These machines involve new techniques in bottle washing and are producing very satisfactory results. At the same time it should be recorded that the other dairies using older machines, by careful maintenance and attention to detergent strengths and temperatures are also preparing clean safe bottles. Their efforts can also be judged by the number of complaints of dirty bottles and bottles with foreign material inside received by the department during the year. These number no more than half-a-dozen, and compared with the position a few years ago is most satisfactory. However, "the misused bottle" is still a major problem for the dairy industry. The chief offender without doubt is the customer and bottles are contaminated with concrete, paint, fouling and staining by long exposure, paraffin, and various other items such as paper, cardboard and even small toys. There is no clear answer to this problem, but with the increasing use of "non-returnable containers" greater care and attention by the dairy operatives, and above all education of the public, the public health dangers can be minimised.

Milk Sampling—Food and Drugs Act, 1955

All samples taken for bacteriological examination are also examined for chemical quality by the Public Analyst. In addition, undermentioned samples were taken for chemical analysis only. These can be divided into those taken as "follow-up" samples of total consignments after unsatisfactory results from individual churns, others are from ungraded supplies arriving at the dairies, and the remainder from milk as sold to the consumer. No cases of added water were reported during the year and although in the past milk has probably been adulterated deliberately and accidentally more than any other food, the position today, as far as can be judged in Leicester, is most satisfactory as regards added water.

Poor quality milk, that is milk below the standard laid down by the Sale of Milk Regulations, 1939, but still genuine milk as produced by the cow continues however to be a problem, as the following number of samples, all of genuine but all of poor quality, will show.

					1957	1958
Number of samples taken—Formal					26	17
Informal					5	358
					—	—
Total					31	375
					—	—

Tubercle Bacilli in Milk

There are nine farms within the city boundary and 36 samples from these producers were submitted to the Public Health Laboratory for biological examination. None were reported as being infested with tubercle bacilli.

Food and Drugs Act, 1955—Foods (other than Milk) and Drug Samples

The samples submitted to the Public Analyst are summarised below.

Food samples—Formal	..	..	..	15
Informal	..	..	..	632
Drug samples—Formal	..	..	..	4
Informal	..	..	..	285

Where any of the above samples were reported as unsatisfactory by the Public Analyst, the necessary follow-up action was taken. Retailers, wholesalers and manufacturers were interviewed or communicated with and every endeavour made to ascertain the reason for the unsatisfactory sample. Full details appear in the Public Analyst’s section of this report. In addition to the above routine sampling many complaints of foreign bodies and alleged unsatisfactory purchases of foodstuff by members of the public were investigated. This aspect of food inspection shows a definite increase from year to year and shows that the public generally are more interested in the hygienic handling of food than ever before. The food trade generally is fully conscious of its responsibilities and strenuous efforts are being made to prevent complaints of this nature arising.

Bacteriological Examination of Shellfish

Number of samples taken	..	..	..	18
Number of samples unsatisfactory	..	..	..	7

Cases which did not satisfy the standard of cleanliness required were dealt with through the Ministry of Agriculture, Fisheries and Food special officer and the local Medical Officers of Health.

Fertilisers and Feeding Stuffs Act, 1926

Number of samples taken—Formal	..	..	..	3
Informal	..	..	..	49
				—
Total	..	..	..	52
Number of samples reported as unsatisfactory :				
Not complying with analytical declaration	..	..	..	8
No analytical declaration given	..	..	..	2
				—
Total	..	..	..	10
				—

The above samples were submitted to the Public Analyst in his capacity as the official Agricultural Analyst. Necessary follow-up action was taken by this department where necessary when unsatisfactory results were reported.

Rag Flock and Other Filling Materials Act, 1951

Number of samples taken	3
Number reported satisfactory	3

Talks and Demonstrations

In addition to talks given and films shown at the Clean Air Exhibition the following health education work was done by various members of the Health Inspection Department Staff :

Lectures Given			
Student Health Visitors	7		
Student District Nurses	2		
Home Helps	6		
Students, Teachers, etc.	16		
Food Handlers, etc.	5		
Adult Schools, Church Fellowships, etc.	8		
			—
Total	44		
			—

Prevention of Damage by Pests Act, 1949

Report for 12 months ended 31st March, 1959

	TYPE OF PROPERTY				(5) Agricul- ture
	Non-Agricultural				
	(1) Local Authority	(2) Dwelling Houses (including Council Houses)	(3) All Other (including Business Premises)	(4) Total of Columns (1), (2) and (3)	
I. Number of properties in Local Authority's District (Notes 1 and 2)	369	90,036	15,362	105,767	Nil
II. Number of properties inspected as a result of:					
(a) Notification ..	121	758	254	1,133	Nil
(b) Survey under the Act	106	2,896	879	3,881	Nil
(c) Otherwise (e.g., when visited primarily for some other purpose) ..	Unavailable	2,334	5,271	7,605	Nil
III. Total inspections carried out including re-inspections. (To be completed only if fig- ures are readily avail- able)	600	5,988	6,404	600	
	827	(Re-inspection figures not available)		13,219	Nil
IV. Number of properties inspected (in Section II) which were found to be infested by :					
(a) Rats .. (Major	12	Nil	5	17	Nil
(Minor	68	752	144	964	Nil
(b) Mice .. (Major	Nil	Nil	Nil	Nil	Nil
(Minor	74	110	292	476	Nil
V. Number of infested properties (in Section IV) treated by the L.A. (Figures should NOT exceed those given at Section IV) ..	154	862	441	1,457	Nil
VI. Total treatments carried out including re-treatments. (To be completed only if fig- ures are readily avail- able)	287	(Figures not available)			
VII. Number of notices served under Section 4 of the Act :					
(a) Treatment ..	Nil	Nil	Nil	Nil	Nil
(b) Structural Work (i.e., Proofing) ..	Nil	Nil	Nil	Nil	Nil
VIII. Number of cases in which default action was taken following the issue of notice under Section 4 of the Act	Nil	Nil	Nil	Nil	Nil
IX. Legal Proceedings ..	Nil	Nil	Nil	Nil	Nil
X. Number of "Block" control schemes carried out	3	31	6	40	Nil

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